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THE CARE OF NEURO-PSYCHIATRIC DISABILITIES.

Some General Considerations and Recommendations.

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The great majority of disabilities falling under the head of neuro-psychiatry require special consideration, for the reason that they involve the behavior of the patient and, thus, his relations with society. They are not simple problems in mechanics, comparable to those brought about by the loss of, or defect in, some organ or portion of the body. They concern the activity of the man as a whole, his understanding of the facts of the world, his feelings, and his attitude toward himself and others. In many instances the disorder itself prevents the patient from making a safe decision as to his course of action, and this selection must often be made for him, sometimes even against his will. Such patients can not be held responsible for their acts, and what is often spoken of as discipline must be here a matter of treatment for disease, to be prescribed only by a physician trained and experienced in mental disorders.

The disturbance in behavior may or may not be combined with, or, in some instances, due to, disease or defect in the organs of the body. Hence, in planning for treatment and rehabilitation, it is necessary to provide facilities for every form of investigation and therapy known to medicine, as well as those specially designed for the treatment of nervous and mental upsets. It should also be noted that even where a disability seems to be more or less adequately explained by the presence of a bodily disease or deformity, the disturbance in function may be modified, enhanced, or perpetuated by a disorder of the mental state. It is therefore important that neuro-psychiatric advice be available to hospitals and relief stations devoted to the treatment of general or special medical and surgical diseases and defects. Real bodily ailments, whether serious or not, often serve as a convenient peg on which to hang a whole train of functional disabilities. To treat the former and thus emphasize, and perhaps exaggerate, their importance may do much to retard or even prevent the real recovery of the patient to the full extent of which he is capable.

In the majority of neuro-psychiatric cases there is no definite bodily disease to be combated. The difficulties are those of making an adjustment to the circumstances in which the patient finds himself. These difficulties are in part inherent in the circumstances themselves, but are more largely the result of the personality of the patient. The personality is dependent partly upon inheritance and partly upon training, experience, and alterations in the body due to disease or accident to which the patient has been subjected during life. It is possible to modify the circumstances to be faced in various ways, and the personality can also be developed by giving fresh training. Thus we can change the work, home, or play surroundings, and we can educate the patient to different habits. It is obvious, however, that such treatment must be individual, and hence requires trained personnel and varied equipment.

For purposes of description, neuro-psychiatric cases may be divided into four groups, which differ from one another in the requirements for treatment. These are:

1. Injury or disease of nerve tissue.
2. The psychoneuroses (or neuroses).
3. The psychoses (or insanities).
4. Certain constitutional nervous deficiencies.

1. INJURY OR DISEASE OF NERVE TISSUE.

Group 1 is comparatively small in size and relatively simple in its requirements. It includes such cases as gunshot and other accidental injuries to nerves and the damage produced by diseases of the nervous system, such as meningitis, "strokes" of paralysis, etc. Uncomplicated disabilities of this kind can be adequately treated in general hospitals or relief stations.

It should be especially emphasized, however, that psychoneurotic additions are not at all infrequent and are very likely to be overlooked. All such cases should therefore be studied with this possibility in mind.

2. THE PSYCHONEUROSES.

In point of actual numbers this group is by far the largest, but for hospitalization it should be extremely small. It includes the great majority of those conditions which were loosely and erroneously described as "shell shock" during the war, the "nervous breakdowns," hysteria, neurasthenia, anxiety neurosis, psychasthenia, and the so-called "functional diseases" of the heart, stomach, and other organs.

In essence, the neurosis is a "way out" of some intolerable conflict or difficulty. The feelings of stress, apprehension, and worry which belong to the conflict are interpreted by the patient as evi-

dences of disease or injury, the origin of which is referred back to some accident or illness (gassing, influenza, overwork, etc.), of the more or less recent past. The suffering is genuine and none the less real because the symptoms are ascribed to disease or injury. The case of a soldier seen at one of the hospitals will illustrate. This man served as a commissioned officer and was slightly gassed. His prewar social status and occupation were those of a railroad brakeman and to these he was obliged to return upon discharge. He did not openly admit, even to himself, that this loss in authority and social dignity and the return to a monotonous routine were unbearable and distasteful. He could not afford, or could not see his way to manage, to take vocational training under the conditions of section 3. He fretted and worried, was unhappy and dissatisfied, and sought an explanation for these feelings other than the facts which he was unwilling to accept. The "gassing" experience offered a way out. He experienced upsets in his breathing as part of his emotional state, but wondered if they were not due to the damage done by the gas. The more he watched them, the worse these feelings became, and soon they were so severe that he had to give up work and thus was relieved of his distasteful and humble position.

The treatment of such cases must consist in the discovery of the conflict or difficulty, the convincing of the patient as to the real facts, and then his assistance to find some more satisfactory method of dealing with it which is within his capacity. Obviously this must be individual and can not be applied to patients in groups or in a routine way. It requires skill and tact, often with the devotion of considerable time upon the part of the physician to this one patient. It is, therefore, not surprising to find that the field officer who has many patients to see and no special clinic to which to refer such cases will immediately recommend hospitalization.

To place such a patient in a hospital is to confirm his belief in the existence of serious disease or damage. Furthermore, it very effectually brings a cessation of the responsibilities and needs for adjustment which brought about the disorder. It is often extremely difficult to discharge such patients and it is a much simpler problem to keep them out of a hospital. No man can be taught to carry a heavy burden by being relieved of the necessity for carrying anything at all. It is true that in some instances the burden may be more than the shoulders can bear. The shoulders must then be trained to bring them to their full strength. If then it be found that the load is too great, steps may be taken to diminish it, but it must not be removed entirely unless we desire to retire the individual from active participation in life.

We were somewhat surprised during our visits to the hospitals to observe many patients with marked hysterical symptoms. As a rule, these rapidly disappear under appropriate treatment, and this observation served to confirm our belief that hospitalization should be avoided. In fact we are very strongly of the opinion that *special hospitals for the treatment of psychoneuroses will eventually be found unnecessary, provided adequately staffed out-patient clinics are established.* Short residence in a hospital may be necessary in a small proportion of cases, but these could be cared for in the diagnostic hospitals of the district. One of us (Dr. Thom) has recently had under treatment in an out-patient clinic, 680 psychoneuroses in ex-service men. Of this number only a little over 4 per cent needed even a short time of hospital residence.

The above considerations also emphasize the importance of seeing that psychoneurotic patients, if they are to be hospitalized at all, are not sent to an improvised hospital in which facilities for treatment are not at once available. So much depends upon the atmosphere and the absence of incentives to loafing that hospitalization under such conditions will inevitably do more harm than good.

3. THE PSYCHOSES.

While group 3, the psychoses, is actually smaller in numbers than group 2, its needs for hospitalization are many times greater. The psychoses differ from the neuroses in that there is a definite loss of touch with reality upon the part of the patient. He does not merely regard himself as sick and incapacitated, but his conception of the facts of the world, of himself, or of both are definitely distorted from the reality. As a direct consequence, the behavior is not appropriate to the actual facts of the surroundings, and there is likelihood of the performance of acts which may harm the patient or others. For this reason the patient must usually be removed from ordinary social life, and it is often necessary to restrain his liberty.

The great majority of psychoses must be treated, often for long periods, in a hospital. The requirements to be met are fairly well established and need not be discussed in detail here. In fairness to the medical officers of the hospitals now in operation it should, however, be pointed out that special arrangement and equipment of wards for the care of acute mental upsets are very important. The improvised facilities provided by the hasty modification of buildings constructed for an entirely different purpose will nearly always be deficient in some important particulars. It can not be too strongly urged that every effort be made to erect hospitals built for the purpose, at the earliest possible moment, and thus do away with the necessity which now exists for doing the best that can be devised at short notice with existing structures. The quieter and less

disturbed mental cases can be treated in buildings of very simple type; but since there is always the possibility of the recrudescence of acute disturbance, there is always the likelihood of the need for the provisions above mentioned.

In many psychoses there is some underlying disease of the nervous system, whereas in others little has as yet been definitely established. Many seem to arise upon the basis of conflicts and difficulties similar to those indicated for the neuroses, but with, perhaps, an added factor of poor construction either from the start, i. e., from birth, or as the result of damage from disease or injury during life.

The information obtainable from the patient as to the history of his life and the factors which have led to the mental breakdown, is often incomplete, unreliable, or even lacking. To do the patient justice it is therefore essential to supplement by outside investigation. For this purpose a well-organized social service is necessary. At present this is being performed by the American Red Cross, but there are so many ways in which social service is needed that there is ample justification for the development of a special service with thorough training in neuro-psychiatric work. Such a social service would act not only to collect information, but also to assist in the rehabilitation of the patient during the difficult period following his release from the hospital.

4. CONSTITUTIONAL NERVOUS DEFICIENCIES.

As the title implies, this group includes cases which were not normal when they entered the Army. Yet, in many of them, Army service is responsible for the present degree of disability. Prior to enlistment the man had found a niche into which he fitted. Service has broken this adjustment, has perhaps aroused ambitions and dreams incapable of realization, and has created cravings for companionship and other things which were previously unknown. The principal problem is, therefore, one of replacement in a suitable environment and but rarely one of hospitalization.

Three different types may be mentioned which present somewhat varying requirements. They are (1) the feeble-minded, (2) the psychopathic personality (constitutional inferiority), and (3) the epileptic.

1. *The feeble-minded.*—The feeble-minded man who was accepted in the service is in practically all cases among the higher grades of defective. He is capable of placement in some activity, though the effort to carry this out may have to be repeated many times before a finally successful adjustment is secured. In attempting this placement and vocational training it is essential that the capabilities of the man be very carefully studied. An unwise selection may result not only in discouragement of the patient, but also in greater disa-

bility than was present at first. To take up responsibilities too heavy for accomplishment lays a very excellent foundation for the development of a psycho-neurosis in the feeble-minded just as it does in those with higher intelligence. Selection of vocation and environment should be made by an expert with all the advice he can get from the physician who has really studied the patient. It can not be successfully made in a 15 or 30 minute interview by some one who knows little more than that there is a demand to fill certain jobs. We believe very strongly that these efforts should be carried out with the advice and supervision of the out-patient clinic which is responsible for the treatment of the patient.

2. *The psychopathic personality.*—The psychopathic personalities present some of the most difficult problems of all. Such persons may show comparatively low intelligence but they may also grade even above the average upon test. The essence of the defect lies in the personality. There appears to be inability to use the intelligence to guide the behavior. The man may seem to have the knowledge which should enable him to select what to do with fair judgment and yet he does not use it. He may perform all sorts of ill-considered acts to gratify the appetites of the moment without consideration of the consequences even though he knows them when questioned. He may commit delinquencies of all degrees of seriousness from vagabondage, lying, stealing, and forging, to murder. It is often alleged that he is insane and he may find his way to a hospital where he is a constant source of trouble, frequently escapes, and is always a menace. Often such persons are plausible and superficially shrewd, but they seem to be incapable of steady application and soon tire of any task. In numbers the group is fortunately small, but the potentialities for evil are large. No State has yet succeeded in dealing with this group satisfactorily.

3. *The epileptic.*—The epileptic in very many instances can get along in the community, especially where compensation and supervision through an out-patient clinic are possible. Such a person is severely handicapped from an industrial point of view, more so than many with more obvious defects. In a certain proportion of cases when the fits are frequent or the patient has difficulty in adjustment due to personality, segregation from ordinary society is advisable. The character of the institution to which he is sent should be that of a model community with its own industries, amusements, etc., rather than a hospital. In the case of epilepsy, probably more than in any other group, it is important that the patient be not sent to an incomplete and improvised institution. Most epileptics are impulsive and inclined to grumble, but these traits are rapidly increased by idleness and lack of attention. In constructing buildings to house epileptics, the possible dangers resulting from the fall-

ing of patients should be kept in mind. We believe that such an institution should be planned and built, but this must be secondary to the more urgent needs for hospitals for psychoses. Epileptics with psychoses will go to these hospitals.

The above considerations as to the nature and needs for treatment of neuro-psychiatric cases lead us to make some general suggestions with regard to the organization of the work. Since the neuro-psychiatric work must be coordinated with the other medical work, the outline here given does not deal only with the former. The outline offered is purposely very general and open to wide variation in regard to details; but it contains some points which we consider essential to the efficient operation of the neuro-psychiatric units.

Plan for the Organization of the Treatment of Disabled Ex-Service Men.

1. The work in each district is subdivided into administrative and professional branches. (See chart.)

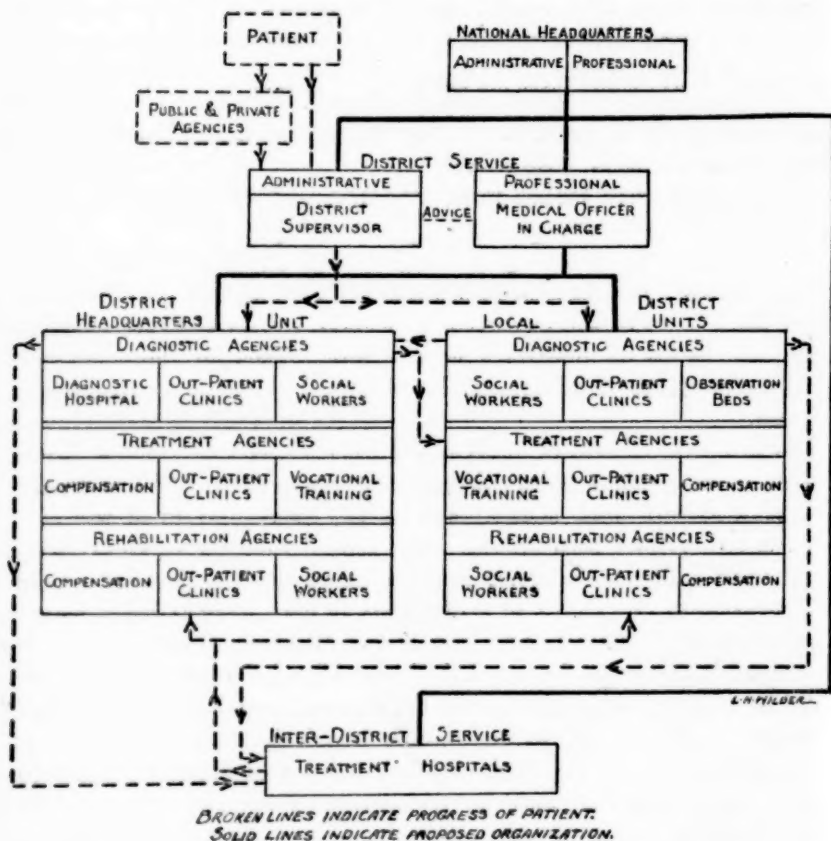
The *administrative branch* makes the first contact with the patient, either directly or through some public or private agency. The patient is then immediately referred to the most convenient outpatient clinic. This branch also determines the compensability and, under the advice of the professional branch, settles the rate of compensation, issues all necessary orders, and makes all arrangements for transfers from or to headquarters unit, local unit, or treatment hospital.

The *professional branch* is provided with a series of medical units located at convenient points throughout the district. One of these, the headquarters unit, is stationed at the headquarters of the district, is subdivided into special and general medical subjects, provided with sufficient hospital accommodation for the detailed study and short term treatment of such cases as may need it (here called the diagnostic hospital), and has access to specialists in all fields who need not always be on full time. The local units will be of suitable size for the communities they serve, will be provided with a few beds for study or temporary hospitalization, probably by contract with a local hospital, and will hold clinics in the specialties only as frequently as may be necessary. Patients needing more detailed and special study than can be given at the local unit can be transferred to the diagnostic hospital of the headquarters unit. Whole-time neuro-psychiatric consultants will not be needed at the local units unless these units be large. They can sometimes be appointed from the membership of local physicians, or the clinic may be served by whole-time specialists traveling from the headquarters unit.

It will be noted on the chart that compensation is given as a means of treatment or rehabilitation. This view of the matter is considered

essential. Vocational training has also been placed among the treatment agencies. It should be possible to prescribe training for portions of a day as well as for a full day so that it may be used in the treatment of patients who are unfit for a full day's work. The term rehabilitation is here used to apply only to the replacement of

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the patient in full citizenship or such degree of self-support as may be possible when all means of treatment have been exhausted.

2. Hospitals for prolonged treatment, especially the psychoses and tuberculosis, will probably serve several districts. On the chart they are indicated as treatment hospitals. Patients will be sent to these hospitals upon the advice of the medical officers of the out-patient clinics, either headquarters or local, and will always be discharged back to the care of the out-patient clinic, which will give any fur-

ther treatment that may be indicated and will supervise the rehabilitation.

It is essential that arrangements be made to transfer copies of the medical records of the patient whenever the patient is transferred from clinic to clinic or from clinic to hospital or vice versa; otherwise many unnecessary examinations must be made which are annoying to the patient and cause much waste of time and effort.

3. From the description and chart it will be appreciated that, under this plan, *the out-patient clinic is the center of the service*. This, we believe, is the only logical solution; it is especially important for the neuro-psychiatric work. Many cases are now being hospitalized to their own detriment because of the absence of facilities for giving treatment without it.

4. Whatever plan of organization be adopted we would especially emphasize the importance of establishing the very closest coordination between the agencies which have to do with treatment, compensation, and vocational training.

TRAINED NEURO-PSYCHIATRIC PERSONNEL.

In our opinion the greatest need of the service at the present moment is for trained personnel. It is an unfortunate fact that neuro-psychiatric medical officers, nurses, social workers, etc., exist only in limited numbers, in no way commensurate with the demands. The plan of work must therefore be made with the greatest economy in mind. All competition between various agencies of the Government should be eliminated and the fullest possible use should be made of civilian experts on a part-time basis.

The plan of organization suggested above makes this possible, as the largest field is at the headquarters unit of the district and is located in the largest center of population. In selecting the site for out-patient clinics and diagnostic hospitals, convenience to consultants should be considered. In selecting assistants it should be noted that the character of the work most needed in the out-patient clinic is different from that in the treatment hospital. The latter resembles more, in the class of work, the State hospital. The former will have a large number of psychoneuroses and also recovered psychoses for rehabilitation.

To supplement the available supply and to prepare for the increased demand which will come with the opening of new hospitals and out-patient clinics we recommend very earnestly the *establishment of a training center* for medical personnel. This center must be accessible to university instruction and also to field facilities. Any of the existing psychopathic institutes, if provided with out-patient clinic facilities, would be suitable and doubtless willing to cooperate.

Every effort should also be made to interest medical students and recent graduates in the field of neuro-psychiatry and to place before them the opportunities offered.

PHYSIOTHERAPY, OCCUPATIONAL THERAPY, AND VOCATIONAL TRAINING.

In our recent visits to the hospitals of the service, and also from other experience, we have been much impressed by the need for more exact definition of the terms physiotherapy, occupational therapy, and vocational training. In the hospitals of the service, *physiotherapy* is placed under the direction of a chief of reconstruction, who may or may not be a physician. Physiotherapy, as the name implies, is a form of medical treatment and, just as much as drugs or surgery, it should be prescribed to suit the needs of the individual patient. Furthermore, such prescription should be given by the physician who has charge of the treatment of the patient. Special technicians to carry out the prescriptions are necessary, but they should bear the same relation to the patient and physician as does the nurse or the pharmacist. Nothing is to be gained by appointing a physician to attend only to physiotherapy more than would be the case were a physician appointed to attend to the giving of drugs.

It is probable that much of the present confusion is brought about by the fact that many of the physicians know little about the technique of physiotherapy and are therefore diffident in prescribing it. But the solution of this difficulty lies in giving training to the physician. The disabilities of the neuro-psychiatric patient, except in the very small group of nerve injuries, are mental and not mechanical. They can not be treated mechanically as can many disabilities of surgery and medicine. The physician is treating disorders of behavior and his remedies must deal with behavior.

As now practiced there seems to be but little distinction made between occupational therapy and vocational training. This is not merely of academic interest, but is fraught with the possibility of real harm to the patient, besides the development of conflicts among personnel. The two activities are in reality entirely distinct.

Occupational therapy is not in any sense an effort "to make something." The purpose with which it is employed is quite variable, as the following classification will indicate. It may be prescribed (a) as a diversion; (b) because it brings into play certain muscles or joints which are functionally damaged; (c) to produce sedation or stimulation; (d) as an education in habits of application. The first two have more place in a general than a neuro-psychiatric hospital which employs occupational therapy more especially for the types (c) and (d).

The *product* of occupational therapy is *the effect* it has upon the patient. The articles produced in the process are, like the copy books of the child in the primary school grades, of no importance. The types of occupation selected are chosen with several things in view; they are interesting; they require a certain degree of steady attention which can be varied by varying the occupation; and they possibly contain elements in technique which may later be useful in industry. They may serve to develop hobbies and recreative interests which will be continued in after life; but the question of value in the product does not enter. It is therefore decidedly harmful, as well as time-consuming, to insist upon a system of accounting for the articles which are produced. Sometimes destruction of good materials is an important part of the therapy. It is true that many of the articles made can be turned to useful account, and this fact in itself has some value in therapy. But the important point is that the patient is affected by the usefulness, sees the articles in use, uses them himself, or even finds by selling them that he has done something worth while. The value to the Government of the articles, which the patient must duplicate if he is to keep one of them for himself, is practically nil.

Vocational training, on the other hand, is a training of the patient to carry out some technical operation and thus to give him a means of earning a livelihood. The *product* is therefore *the patient placed in industry*. Articles produced in this process must have a market value, and there is absolutely no place for the merely beautiful but fancy products, the value of which is personal and largely artificial.

Much of the work being conducted under the name of vocational training in neuro-psychiatric hospitals (to which alone we are referring) is nothing but the routine application of procedures employed in occupational therapy. As a rule, also, they are applied to all alike without consideration of the needs of the patient. This situation is more or less clearly recognized by the workers themselves, and they have introduced the term "prevocational training" in order to explain the fact that all that is produced is a beautiful exhibit while patients are not being placed in industry.

We are convinced that the true explanation of this situation is that there are but few neuro-psychiatric patients in hospitals who need, or are capable of, vocational training. These few are the convalescents or those considered to have recovered to the fullest extent possible from the effects of the disease from which they have suffered. It would therefore seem desirable to allow the hospital, under the direction of its own physicians, to carry out its occupational therapy up to the point where vocational training is indicated. The patient may then be sent to a training field, still under the supervision of medical officers in the locality of the field, or if there is a sufficient number requiring the same kind of training, an instructor and aids could be sent to the hospital.

TREATMENT, TRAINING, AND COMPENSATION.

There is no aspect of the problem which has to do with the rehabilitation of the ex-service man, excepting that of medical personnel, which is of such vital importance as the close cooperation between the departments which have to do with treatment, training, and compensation. Perhaps to one who is not in actual contact with neuro-psychiatric cases in a medical way, the logical sequence of events would be to restore the patient to the highest degree of efficiency by therapeutic measures before beginning to train him for some trade or profession in order to establish his economic independence. Under this order of procedure each department would work quite independently of the other and the man would be shifted from one to the other whenever a cross section of the individual indicated the need for a change. However, as all of us who are dealing directly with the ex-service man know, this cross-section method has proved a definite failure. What is needed is a longitudinal section of the patient's life in order that we may consider his past experiences, his present needs, and his future possibilities. For example, if we are dealing with a mentally deficient individual whose war experiences have rendered him incapable of adjusting himself to his present environment and conditions, although his history prior to the war shows that he got along fairly well in the community, we can not neglect his present needs, which may mean the actual necessities of life. These, of course, can only be met by compensation; and while future possibilities for this patient may or may not lie in training, certainly in such a case training can only be of advantage if selected after a careful study of the mental equipment and temperamental fitness of the prospective trainee.

The question of who is best fitted by reason of experience, training and opportunity to decide upon the presence or absence of the particular qualities which account for success or failure in an individual, is quite debatable but, other things being equal, that is, intellect and opportunity for observation, it seems that the psychiatrist who has made a study of the particular case is best qualified to advise regarding the type of work for which the individual is best fitted by virtue of his physical and mental equipment, as well as by temperament and disposition.

We very frequently find the man with a mental age of 12 to 14 years struggling along in some trade or profession which is obviously not within his grasp. The more ambitious and persevering the man, the greater the conflict between his ambition and his achievements, and sooner or later, we find him seeking refuge in a neurosis. The same is true when an individual fitted for manual work begins to take

up accounting; when the lad who craves outdoor life finds himself shut up in a factory; when the man who is quick and impulsive is forced to do work which requires caution and deliberation; or when the individual who works well under supervision suddenly is thrown into a position that demands responsibility. All of these individual questions must be considered when dealing with problems of vocational guidance.

It is not intended to convey the idea that the neuro-psychiatrist should take the place of an expert trained in the problems of vocational guidance, but that he should advise with this expert or furnish him with all the data at hand pertaining to the prospective trainee's mental equipment and temperamental fitness for general types of work. It seems to us that in this way many of the glaring mistakes that have occurred in the past will be obviated. It may be well to repeat what has already been said elsewhere, that a large percentage of the relapses among the neuro-psychiatric cases in training are directly due to being shunted off into some trade or profession for which they are unsuited.

Much unnecessary time and money may be spent by the Government in recommending treatment and training for a certain group of applicants for compensation when it is perfectly obvious that treatment will be of no avail and training is not feasible. The problem of compensation and supervision by some social agency might just as well be met at once. This will allow the applicant to plan his future along practical lines and will not keep him upset by repeated disappointments which tend to aggravate his condition and make his adjustment more difficult. For example: An epileptic first received temporary total disability compensation of \$80. In an effort to increase his income he applied for Federal Board training and was successively placed in a machine shop, a tinsmith shop, a garage, and finally a commercial school. This claimant is an ambitious, earnest, sort of chap, of very limited intellectual capacity, and his repeated failures have completely destroyed his morale. Just recently he has been notified that he has a total permanent disability, but his reaction to this, at this period in his dealing with the Government, is one of discouragement and discontent. It seems to us that if this situation had been correctly sized up in the first place, this claimant's attitude toward life in general and the Government in particular might be quite different.

DEATH ERRONEOUSLY ATTRIBUTED TO CHLORINATED WATER.

THE PENNSYLVANIA DEPARTMENT OF HEALTH, ON POST MORTEM, FINDS THAT CHLORINATED WATER WAS NOT THE CAUSE OF DEATH.¹

A citizen of West Grove, Chester County, Pa., died after but a few hours' sickness, and, on June 11, 1921, a coroner's jury, after hearing the testimony of his attending physician, which included a statement that he had drunk copiously of the chlorinated public water supply, rendered a verdict that death was caused by "general systemic debility caused by chemicalized water, which produced a severe gastro-enteritis followed by cardiac failure."

When the death certificate was received by the State registrar of vital statistics, the commissioner of health of Pennsylvania caused the body to be disinterred for post-mortem examination, in order to permit a most searching investigation to be made, in view of the fact that millions of citizens of the United States drink of public water supplies that are disinfected with chlorine for the purpose of safeguarding the public health.

On June 17 Dr. Baldwin Lucke, an expert pathologist of the University of Pennsylvania, who is reported to make 600 post mortems a year, performed an autopsy, which showed no evidence of inflammation of the mouth, throat, stomach, or intestines; and Dr. Lucke stated that in his opinion the cause of death was dilatation of the heart, possibly brought on by excitement or exertion, that marked arteriosclerosis was the underlying cause of the heart condition, and that he did not believe that the drinking of chlorinated water had anything whatever to do with the death of the man.

The attending physician was present at the autopsy, and, as a result of his observations and Dr. Lucke's report, he requested the coroner to reempanel the jury to hear the new evidence resulting from the autopsy. This was done on July 1, 1921, and the jury made a supplemental report, to wit:

That chlorine was neither directly nor indirectly the cause of death; that death was due to acute dilatation of the heart, sequential to the loss of bodily fluids, incident to a severe attack of toxic gastroenteritis, with complicating, extensive cardio-vascular and renal degeneration.

The facts in the case are as follows:

The public water supply of West Grove is obtained from a dug well, supplemented at times from a near-by surface stream.

Several years ago the construction of water filters was begun but they were never finished.

¹ From a report by C. A. Emerson, Jr., Chief Engineer, Pennsylvania Department of Health.

The physical conditions at the well permitted pollution of the water, and analysis of samples showed evidence of sewage contamination. Therefore, the Pennsylvania Department of Health directed the borough officials to disinfect the public water supply pending the completion of the water filters.

The usual method of chlorine disinfection was adopted, that is, the addition of chlorinated lime to the water at a rate ordinarily used for such raw water.

The decedent's house is located about one-half mile from the well where the chlorinated lime was added to the water, and there are about 25 or 30 water connections along the main between the well and his house. There has been no evidence of any discomfort or illness accredited to the public water supply in any of these houses.

The decedent was a man 65 years of age; but a physician who was present at the autopsy stated that the condition of his body was similar to that usually found in a man at least 80 years of age.

He had spent practically the entire day before his fatal illness in strenuous activity, returning to his home about 10 o'clock at night, tired and exhausted. Shortly afterward, he felt ill and retired. Vomiting and purging began, followed by stupor. Death occurred about 30 hours after he had been taken sick.

The medicinal dose of chlorinated lime administered for curative purposes is 3 grains. Assuming the decedent drank 2 quarts of the public water he would have received only about one-eighthieth of the curative dose. Furthermore, prominent physicians are of the opinion that had the decedent, upon his return after a strenuous day's work, drank an equal quantity of the purest spring water the same results would have occurred.

All the evidence shows that overexertion and exhaustion were the real causes, and the official record in the office of the State registrar of vital statistics gives the immediate cause of death as "acute dilatation of the heart," with contributing cause as "acute gastroenteritis."

The case is clear. There is not the slightest evidence that the disinfection of the public water supply had anything to do with the man's death, and there is no reason to fear that the chemical disinfection of public water supplies is other than an important safeguard and protection to the public health.

BIRTH STATISTICS AND INFANT MORTALITY, 1920.¹

Report of the Bureau of the Census for the Birth Registration Area of the United States.

In the birth registration area of the United States, 1,508,874 infants were born alive in 1920. If the registration area for 1920 is made comparable with that for 1919, the per cent of increase of births in 1920 over 1919 is 7.6. The total number of deaths in the same area in 1920 was 836,154, the births exceeding the deaths by 672,720, or 80.4 per cent.

Birth Registration Area.

The birth registration area was established in 1915, when it comprised only 10 States, the 6 New England States, New York, Pennsylvania, Michigan, and Minnesota, and the District of Columbia. In 1916 Maryland was added, and in 1917 Virginia, North Carolina, Kentucky, Ohio, Indiana, Wisconsin, Kansas, Utah, and Washington were added. No States were added in 1918, but in 1919 Oregon and California, covering the Pacific coast area, were admitted, and South Carolina, which extended the area along the Atlantic coast, was added, making the per cent of estimated population included about 58. Nebraska was added to the registration area in 1920.

Infant Mortality.

The infant mortality rate (number of deaths of infants under 1 year of age per 1,000 born alive) for 1920 is 86, which is the lowest rate on record in the birth registration area. The rate for 1919 was 87, reported by the Census Bureau as being the lowest infant mortality rate in the birth registration area up to that time. The rate for 1920 shows a decrease of 1 per cent from that for 1919.

Population, births, and deaths in the birth registration area, 1920.

Area.	Population, 1920.	Births, 1920.	Birth rate.	Deaths, 1920.	Death rate.
The birth registration area.....	63,650,441	1,508,874	23.7	836,154	13.1

¹ Similar reports for 1918 and 1919 were published in the Public Health Reports for May 14, 1920, pp. 1149-1152, and Oct. 15, 1920, pp. 2465-2466, respectively.

Births (exclusive of stillbirths), per cent of increase over 1919, deaths of infants under 1 year of age, and infant mortality rates in the birth registration area, 1920.

Area.	Births, 1919.	Births, 1920.	Increase of 1920 over 1919.	Per cent of in- crease.	Deaths of infants under 1 year of age, 1920.		Increase (+) or decrease (-) in infant mortal- ity rate since 1919.
					Total.	Per 1,000 births	
The registration area.....	1,373,438	1,508,874	135,436	9.9	129,531	86	- 1
REGISTRATION STATES.							
California.....	56,528	67,199	10,671	18.9	4,996	74	+ 4
Connecticut.....	33,912	34,096	184	0.5	3,134	92	+ 6
Indiana.....	59,286	64,809	5,523	9.3	5,301	82	+ 3
Kansas.....	36,373	39,632	3,259	9.0	2,898	73	+ 3
Kentucky (total).....	57,737	62,888	5,151	8.9	4,597	73	- 9
White.....	53,658	58,747	5,089	9.5	4,025	69	- 8
Colored.....	4,079	4,141	62	1.5	572	138	- 9
Maine.....	15,496	17,328	1,832	11.8	1,761	102	+11
Maryland (total).....	33,972	36,212	2,240	6.6	3,768	104	- 1
White.....	27,448	29,452	2,004	7.3	2,657	90	- 2
Colored.....	6,524	6,760	236	3.6	1,111	164	+ 4
Massachusetts.....	87,709	91,692	3,983	4.5	8,337	91	+ 3
Michigan.....	83,910	92,740	8,830	10.5	8,504	92	+ 2
Minnesota.....	51,942	55,909	3,967	7.6	3,715	66	- 1
Nebraska.....	(²)	30,911	(²)	(²)	1,986	64	(²)
New Hampshire.....	8,778	9,946	1,168	13.3	875	88	- 5
New York.....	226,108	235,243	9,135	4.0	20,309	86	+ 2
North Carolina (total).....	73,854	81,407	7,553	10.2	6,909	85	+ 1
White.....	51,832	57,054	5,222	10.1	4,168	73	- 1
Colored.....	22,022	24,353	2,331	10.6	2,741	113	+ 4
Ohio.....	113,054	123,729	10,675	9.4	10,252	83	- 7
Oregon.....	13,540	14,942	1,402	10.4	924	62	- 1
Pennsylvania.....	207,685	220,462	12,777	6.2	21,415	97	- 3
South Carolina (total).....	44,624	47,777	3,153	7.1	5,531	116	+ 3
White.....	22,016	23,813	1,797	8.2	1,986	83	+ 7
Colored.....	22,608	23,964	1,356	6.0	3,545	148	- 1
Utah.....	13,040	14,157	1,117	8.6	1,011	71	.....
Vermont.....	7,032	7,409	377	5.4	713	96	+11
Virginia (total).....	60,785	65,794	5,009	8.2	5,500	84	- 7
White.....	41,656	45,229	3,573	8.6	3,241	72	- 6
Colored.....	19,129	20,565	1,436	7.5	2,259	110	-10
Washington.....	25,112	27,072	1,960	7.8	1,797	66	+ 3
Wisconsin.....	54,781	58,697	3,916	7.1	4,493	77	- 3

¹ If the registration area for 1920 is made comparable with that for 1919 by excluding Nebraska, the per cent of increase of births is 7.6.

² Not added to the registration area until 1920.

Births, infant mortality rates, and the increase or decrease in the infant mortality rates since 1919, in the registration cities: 1920.

Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.	Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.
CALIFORNIA.				INDIANA.			
Alameda.....	615	59	+ 9	Anderson.....	655	90	+ 5
Bakersfield.....	586	80	- 1	Bloomington.....	341	73	(1)
Berkeley.....	970	44	- 8	Clinton.....	291	82	(1)
Eureka.....	298	67	+ 8	Crawfordsville.....	206	88	(1)
Fresno.....	1,332	101	+23	East Chicago.....	1,138	174	+40
Glendale.....	194	67	(1)	Elkhart.....	550	69	.....
Long Beach.....	1,031	60	+11	Elwood.....	298	54	-25
Los Angeles.....	11,435	71	+ 4	Evansville.....	1,458	93	+ 4
Oakland.....	4,142	71	+10	Fort Wayne.....	1,774	79	+ 4
Pasadena.....	800	31	-14	Frankfort.....	263	80	(1)
Pomona.....	329	94	+28	Gary.....	1,662	111	+ 9
Richmond.....	413	36	(1)	Hammond.....	976	100	+ 2
Riverside.....	430	88	-20	Huntington.....	287	73	+ 7
Sacramento.....	1,659	78	+ 4	Indianapolis.....	6,848	91	+11
San Bernardino.....	487	97	-10	Jeffersonville.....	195	62	-36
San Diego.....	1,651	57	- 5	Kokomo.....	722	79	-10
San Francisco.....	9,034	62	.....	Lafayette.....	581	108	+28
San Jose.....	723	62	+ 1	Laporte.....	334	96	- 3
Santa Ana.....	365	85	(1)	Logansport.....	471	89	+16
Santa Barbara.....	435	76	+13	Marion.....	551	103	+35
Santa Cruz.....	196	46	-19	Michigan City.....	516	81	.....
Santa Monica.....	316	47	(1)	Mishawaka.....	412	85	-31
Stockton.....	990	80	+11	Muncie.....	842	99	+ 9
Vallejo.....	392	56	+ 1	New Albany.....	496	58	-34
Venice.....	57	88	(1)	Newcastle.....	365	129	(1)
CONNECTICUT.				Perru.....	301	73	- 5
Ansonia.....	446	143	+44	Richmond.....	432	97	-15
Bridgeport.....	4,178	92	+ 4	South Bend.....	1,806	104	+17
Bristol.....	643	132	+60	Terre Haute.....	1,397	110	+24
Denbury town.....	562	96	+ 7	Vincennes.....	415	101	+17
Derby.....	540	91	(1)	Whiting.....	334	129	(1)
KANSAS.				KANSAS.			
East Hartford town.....	186	70	(1)	Arkansas City.....	321	62	(1)
Enfield town.....	365	74	(1)	Atchison.....	241	83	+ 4
Fairfield town.....	253	95	(1)	Chanute.....	294	92	(1)
Greenwich town.....	466	83	- 3	Coffeyville.....	424	90	+30
Hartford.....	4,214	99	+ 4	Eldorado.....	338	83	(1)
Manchester town.....	349	37	-29	Emporia.....	276	80	(1)
Meriden town.....	859	69	+19	Fort Scott.....	242	140	+83
Middletown town.....	650	82	+ 1	Hutchinson.....	550	98	+ 9
Milford town.....	188	64	(1)	Independence.....	293	58	-24
Naugatuck.....	277	87	- 1	Kansas City.....	2,256	108	.....
New Britain.....	1,763	101	+ 6	Lawrence.....	248	52	+25
New Haven.....	4,229	87	+14	Leavenworth.....	311	80	-25
New London.....	759	78	+19	Parsons.....	349	86	- 5
Norwalk.....	508	85	+ 9	Pittsburg.....	304	69	+10
Norwich town.....	764	101	+20	Salina.....	361	64	(1)
Orange town.....	350	100	+10	Topeka.....	1,129	93	+18
Stamford town.....	1,047	94	+10	Wichita.....	1,681	96	+ 5
Stonington town.....	237	55	(1)	KENTUCKY.			
Stratford town.....	285	116	(1)	Ashland.....	461	72	(1)
Torrington town.....	594	86	+ 5	Covington.....	1,223	80	-11
Wallingford town.....	215	84	+11	Henderson.....	274	91	-10
Waterbury.....	2,574	103	-10	Lexington.....	822	92	-58
Windham town.....	398	90	- 6	Louisville.....	4,730	86	-10
DISTRICT OF COLUMBIA.				Newport.....	565	83	-15
Washington.....	8,823	91	+ 6	Owensboro.....	468	100	-10
				Paducah.....	506	126	-16

¹ Population less than 10,000 in 1910.

Births, infant mortality rates, and the increase or decrease in the infant mortality rates since 1919, in the registration cities: 1920—Continued.

Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.	Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.
MAINE.				MASSACHUSETTS—CON.			
Auburn.....	215	98	- 4	North Adams.....	502	70	-18
Augusta.....	307	160	+67	Northampton.....	512	86	+22
Bangor.....	520	104	+22	Northbridge town.....	273	99	(1)
Bath.....	317	88	(1)	Norwood town.....	414	68	(1)
Biddeford.....	529	93	+19	Peabody.....	533	85	+ 4
Lewiston.....	861	134	+24	Pittsfield.....	1,096	65	+ 1
Portland.....	1,608	113	+31	Plymouth town.....	286	147	+83
Sanford town.....	280	114	(1)	Quincy.....	1,053	64	.....
Waterville.....	383	63	-30	Revere.....	627	53	-10
				Salem.....	1,112	85	+16
MARYLAND.				Saugus town.....	229	83	(1)
Annapolis.....	266	128	(1)	Somerville.....	1,918	80	+19
Baltimore.....	18,520	106	+ 8	Southbridge town.....	361	58	-13
Cumberland.....	837	96	-16	Springfield.....	3,419	85	+ 1
Frederick.....	283	103	+ 1	Taunton.....	936	93	-28
Hagerstown.....	727	78	- 9	Wakefield town.....	239	67	+ 9
				Waltham.....	787	64	+ 3
MASSACHUSETTS.				Watertown town.....	368	73	- 4
Adams town.....	343	73	- 3	Webster town.....	339	56	-16
Amesbury town.....	174	63	(1)	West Springfield town.....	207	87	(1)
Arlington town.....	389	67	-14	Westfield town.....	445	86	.....
Attleboro.....	494	67	-14	Weymouth town.....	251	69	+10
Belmont town.....	158	51	(1)	Winchester town.....	299	64	(1)
Beverly.....	498	54	+ 6	Winthrop town.....	227	40	-24
Boston.....	19,536	101	+ 4	Woburn.....	387	78	+ 5
Braintree town.....	209	81	(1)	Worcester.....	4,809	85	- 7
Brookton.....	1,531	71	- 6				
Brookline town.....	272	66	+13	MICHIGAN.			
Cambridge.....	2,856	96	+26	Adrian.....	274	51	-23
Chelsea.....	1,233	63	- 2	Alpena.....	293	125	.....
Chicopee.....	1,010	114	- 5	Ann Arbor.....	668	100	+ 6
Clinton town.....	339	116	+32	Battle Creek.....	767	77	+ 6
Danvers town.....	138	65	(1)	Bay City.....	1,222	90	-15
Dedham town.....	205	63	(1)	Benton Harbor.....	296	54	(1)
Easthampton town.....	351	91	(1)	Detroit.....	27,660	104	+ 7
Everett town.....	902	82	+21	Escanaba.....	468	100	+ 6
Fall River.....	3,537	129	+10	Flint.....	2,896	84	-20
Fitchburg.....	1,101	67	- 2	Grand Rapids.....	3,128	99	+14
Framingham town.....	512	64	- 8	Hamtramck.....	1,851	129	(1)
Gardner town.....	374	102	+13	Highland Park.....	845	86	(1)
Gloucester.....	486	74	-15	Holland.....	333	66	- 2
Greenfield town.....	345	87	+14	Ironwood.....	444	90	- 4
Haverhill.....	1,242	92	+ 6	Ishpeming.....	258	78	-33
Holyoke.....	1,588	117	- 3	Jackson.....	1,198	81	-17
Lawrence.....	2,516	104	+ 1	Kalamazoo.....	1,317	77	-15
Leominster.....	450	69	-17	Lansing.....	1,523	75	-50
Lowell.....	3,154	135	+11	Marquette.....	339	77	-36
Lynn.....	2,024	82	+16	Monroe.....	302	109	(1)
Malden.....	1,111	54	-16	Muskegon.....	1,078	91	+ 5
Marlborough.....	348	69	+ 2	Owosso.....	277	116	(1)
Medford.....	840	85	+17	Pontiac.....	980	90	-18
Melrose.....	373	56	- 1	Port Huron.....	686	108	-15
Methuen town.....	374	88	+10	Saginaw.....	1,651	111	.....
Millford town.....	403	72	+16	Sault Ste. Marie.....	359	120	+23
Natick town.....	263	57	(1)	Traverse City.....	177	102	+40
New Bedford.....	3,507	122	Wyandotte.....	492	138	(1)
Newburyport.....	437	85	+11				
Newton.....	900	64	- 5				

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Births, infant mortality rates, and the increase or decrease in the infant mortality rates since 1919, in the registration cities: 1920—Continued.

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MINNESOTA.				NEW YORK—continued.			
Austin.....	235	106	(1)	New York.....	132,823	85	+ 4
Duluth.....	2,446	75	— 3	Bronx borough.....	14,568	77	+ 4
Faribault.....	245	114	(1)	Brooklyn borough.....	48,970	81	+ 4
Hibbing.....	447	69	(1)	Manhattan borough.....	57,108	91	+ 4
Mankato.....	305	52	—18	Queens borough.....	9,418	83	+ 4
Minneapolis.....	9,182	65	Richmond borough.....	2,759	93	—10
Rochester.....	335	93	(1)	Newburgh.....	673	92	+ 3
St. Cloud.....	490	86	— 7	Niagara Falls.....	1,549	92	—22
St. Paul.....	5,175	73	+ 5	North Tonawanda.....	414	92	—22
Virginia.....	374	88	+33	Ogdensburg.....	327	190	+67
Winona.....	385	49	—36	Olean.....	544	86	—10
NEBRASKA.				Oneida.....	294	75	(1)
Grand Island.....	320	97	(1)	Oneonta.....	255	51	(1)
Hastings.....	364	91	(1)	Ossining.....	228	57	+14
Lincoln.....	1,349	70	(1)	Oswego.....	565	76	+ 4
North Platte.....	258	39	(1)	Peekskill.....	334	90	+21
Omaha.....	4,515	92	(1)	Plattsburg.....	287	87	—40
NEW HAMPSHIRE.				Port Chester.....	545	64	—13
Berlin.....	552	118	+36	Port Jervis.....	249	92	(1)
Concord.....	413	65	—33	Poughkeepsie.....	813	96	+ 3
Dover.....	342	67	—56	Rensselaer.....	102	98	+49
Keene.....	244	98	+22	Rochester.....	6,716	84	+10
Laconia.....	259	73	—28	Rome.....	691	109	+28
Manchester.....	2,145	109	— 2	Saratoga Springs.....	273	81	—12
Nashua.....	772	93	—16	Schenectady.....	1,964	86	+ 7
Portsmouth.....	380	87	+34	Syracuse.....	4,185	105	+14
NEW YORK.				Tonawanda.....	222	113	(1)
Albany.....	2,280	77	— 4	Troy.....	1,381	102	—15
Amsterdam.....	836	86	— 8	Utica.....	2,439	83	— 5
Auburn.....	764	106	+16	Watertown.....	784	115	+24
Batavia.....	348	95	+13	Watervliet.....	295	98	+ 6
Beacon.....	204	123	(1)	White Plains.....	477	63	+ 1
Binghamton.....	1,675	91	— 3	Yonkers.....	2,392	89	+ 9
Buffalo.....	13,321	103	— 7	NORTH CAROLINA.			
Cohoes.....	422	104	+ 7	Asheville.....	678	118	+14
Corning.....	426	63	+ 6	Charlotte.....	1,192	111	—27
Cortland.....	290	69	— 8	Durham.....	540	143	—14
Dunkirk.....	562	93	+ 4	Gastonia.....	637	89	(1)
Elmira.....	1,165	72	— 7	Goldsboro.....	364	143	(1)
Fulton.....	315	86	+13	Greensboro.....	469	87	—35
Geneva.....	380	124	+13	High Point.....	493	81	(1)
Glens Falls.....	400	83	— 1	Newbern.....	334	111	(1)
Gloversville.....	441	88	— 2	Raleigh.....	661	97	+10
Herkimer.....	285	84	(1)	Rocky Mount.....	421	128	(1)
Hornell.....	295	61	+ 6	Salisbury.....	405	69	(1)
Hudson.....	320	72	—28	Wilmington.....	1,009	134	+ 4
Ilion.....	187	50	(1)	Wilson.....	311	125	(1)
Ithaca.....	350	94	+26	Winston-Salem.....	1,355	122	— 1
Jamestown.....	813	89	+21	OHIO.			
Johnstown.....	183	87	—16	Akron.....	5,395	84	—22
Kingston.....	495	79	—21	Alliance.....	409	96	+ 6
Lackawanna.....	851	281	Ashtabula.....	547	66	— 4
Little Falls.....	351	83	—18	Barberton.....	507	101	(1)
Lockport.....	417	103	— 1	Bellaire.....	332	114	+13
Middletown.....	311	84	+20	Bucyrus.....	246	57	(1)
Mount Vernon.....	955	82	+21	Cambridge.....	320	72	—41
New Rochelle.....	670	66	— 9	Canton.....	2,079	96	+ 8
				Chillicothe.....	371	59	—33
				Cincinnati.....	7,815	82	— 9

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² Not added to the registration area until 1920.

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OHIO—continued.				PENNSYLVANIA—contd.			
Cleveland.....	19,379	87	- 9	Chambersburg.....	330	67	-26
Cleveland Heights.....	64	78	(1)	Charleroi.....	355	90	(1)
Columbus.....	4,701	96	+ 2	Chester.....	1,833	117	+23
Coshocton.....	237	63	(1)	Coatesville.....	392	107	+12
Cuyahoga Falls.....	261	54	(1)	Columbia.....	305	95	+ 7
Dayton.....	3,246	85	- 4	Connellsville.....	341	91	-35
East Cleveland.....	269	115	(1)	Dickson City.....	313	121	(1)
East Liverpool.....	378	114	+11	Donora.....	535	80	(1)
East Youngstown.....	515	183	(1)	Dubois.....	384	102	+33
Elyria.....	512	90	-20	Dunmore.....	560	229	+57
Findlay.....	351	63	- 6	Duquesne.....	586	137	+23
Fremont.....	278	47	(1)	Easton.....	834	91	+ 1
Hamilton.....	962	100	- 2	Erie.....	2,579	94	+16
Ironton.....	318	169	+28	Farrell.....	460	139	-14
Kenmore.....	447	110	(1)	Greensburg.....	420	64	-22
Lakewood.....	690	61	-21	Harrisburg.....	1,513	87	- 8
Lancaster.....	328	70	-13	Hazleton.....	911	98	.....
Lima.....	934	112	+14	Homestead.....	591	112	-13
Lorain.....	1,072	111	- 5	Jeannette.....	389	67	(1)
Mansfield.....	657	65	+17	Johnstown.....	2,207	121	+ 3
Marietta.....	341	82	- 5	Lancaster.....	1,388	100	+ 3
Marion.....	641	105	+14	Lebanon.....	656	104	+ 1
Martins Ferry.....	262	118	(1)	McKees Rocks.....	585	111	-11
Massillon.....	405	74	-29	McKeesport.....	1,403	105	-12
Middletown.....	784	69	- 5	Mahanoy City.....	405	146	-13
New Philadelphia.....	243	58	(1)	Meadville.....	391	92	+21
Newark.....	590	85	+ 5	Monessen.....	662	97	+ 4
Niles.....	261	88	(1)	Mount Carmel.....	500	92	-17
Norwood.....	256	74	- 1	Nanticoke.....	746	99	+12
Piqua.....	317	95	+29	New Castle.....	1,301	92	+ 8
Portsmouth.....	841	117	+17	New Kensington.....	416	79	(1)
Salem.....	221	90	(1)	Norristown.....	781	113	+16
Sandusky.....	522	79	- 4	North Braddock.....	428	86	+ 4
Springfield.....	1,335	76	-16	Oil City.....	543	103	- 1
Steubenville.....	597	126	+ 5	Old Forge.....	443	135	+19
Tiffin.....	282	50	-37	Olyphant.....	288	122	(1)
Toledo.....	5,340	89	- 1	Philadelphia.....	43,642	91	.....
Warren.....	772	98	+17	Phoenixville.....	362	75	- 5
Youngstown.....	3,956	95	- 4	Pittsburgh.....	14,740	111	- 3
Zanesville.....	670	78	-30	Pittston.....	619	108	+ 3
OREGON.				Plymouth.....	371	113	-24
Astoria.....	343	55	(1)	Pottstown.....	395	116	+10
Eugene.....	271	77	(1)	Pottsville.....	570	125	- 8
Portland.....	5,202	60	- 9	Punxsutawney.....	294	88	(1)
Salem.....	370	51	-33	Reading.....	2,577	99	- 4
PENNSYLVANIA.				Seranton.....	2,958	110	+20
Allentown.....	1,836	102	.....	Shamokin.....	523	105	+ 5
Altoona.....	1,592	88	.....	Sharon.....	695	109	- 5
Ambridge.....	345	133	(1)	Shenandoah.....	801	139	-25
Beaver Falls.....	315	92	-30	Steelton.....	350	123	+15
Berwick.....	371	84	(1)	Sunbury.....	375	64	- 7
Bethlehem.....	1,606	71	-11	Swissvale.....	245	131	(1)
Bradock.....	811	136	+ 7	Tamaqua.....	270	115	(1)
Bradford.....	391	99	+35	Uniontown.....	461	102	- 2
Bristol.....	384	68	(1)	Warren.....	373	62	- 7
Butler.....	666	57	-24	Washington.....	655	98	- 5
Canonsburg.....	285	98	(1)	West Chester.....	355	115	.....
Carbondale.....	442	84	-18	Wilkes-Barre.....	2,107	93	+ 8
Carlisle.....	235	106	- 4	Wilkinsburg.....	674	79	+23
Carnegie.....	366	120	+ 6	Williamsport.....	964	72	-16
Carriek.....	232	82	(1)	Woodlawn.....	464	95	(1)
				York.....	1,149	87	-17

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Births, infant mortality rates, and the increase or decrease in the infant mortality rates since 1919, in the registration cities: 1920—Continued.

Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.	Area.	Births.	Deaths of infants under 1 year of age per 1,000 births.	Increase (+) or decrease (-) in infant mortality rate since 1919.
SOUTH CAROLINA.				WASHINGTON.			
Anderson.....	533	94	(1)	Aberdeen.....	346	55	+ 9
Charleston.....	1,558	279	+27	Bellingham.....	551	64	+10
Columbia.....	1,315	133	+15	Everett.....	562	69	- 9
Florence.....	375	179	(1)	Hoquiam.....	234	56	(1)
Greenville.....	571	109	+18	Seattle.....	6,106	57	+ 2
Spartanburg.....	557	104	-10	Spokane.....	2,446	71	+16
UTAH.				Tacoma.....	2,221	64	- 2
Ogden.....	1,114	56	-10	Vancouver.....	323	62	(1)
Provo.....	262	88	(1)	Walla Walla.....	331	82	+14
Salt Lake City.....	3,326	72	- 5	Yakima.....	660	102	+21
VERMONT.				WISCONSIN.			
Barre.....	217	60	- 8	Appleton.....	432	65	-41
Burlington.....	711	132	-16	Ashland.....	302	86	-20
Rutland.....	281	125	+22	Beloit.....	514	84	+ 2
VIRGINIA.				Eau Claire.....	627	78	-10
Alexandria.....	500	118	+41	Fond du Lac.....	571	103	+27
Charlottesville.....	285	63	(1)	Green Bay.....	891	148	+10
Danville.....	575	85	-31	Janesville.....	376	90	+23
Lynchburg.....	907	71	-22	Kenosha.....	1,047	97	+ 2
Newport News.....	739	131	+ 3	La Crosse.....	761	70	-21
Norfolk.....	2,862	100	- 8	Madison.....	832	52	- 9
Petersburg.....	872	148	+12	Manitowoc.....	405	106	+ 1
Portsmouth.....	1,396	102	+ 1	Marinette.....	297	77	- 7
Richmond.....	4,197	114	+ 8	Milwaukee.....	10,525	94	+13
Roanoke.....	1,534	109	+ 9	Oshkosh.....	681	78	- 8
Staunton.....	193	119	+20	Racine.....	1,427	74	-14
				Sheboygan.....	728	73	(1)
				Stevens Point.....	326	74	-15
				Superior.....	940	84	(1)
				Waukesha.....	273	59	+28
				Wausau.....	484	107	(1)
				West Allis.....	291	103	(1)

¹ Population less than 10,000 in 1919.

PREVALENCE OF DIPHTHERIA IN THE UNITED STATES.

The accompanying table shows, by months, the number of cases of diphtheria reported to the State health officers during the first nine months of 1921. For comparison the median number of cases reported in each State during the last eight years is also given.

The median was ascertained by arraying the figures so that the greatest number was first, the next greatest number was second, and so on to the smallest number, which was placed last. The middle number of the array was then selected as the median.

For the first eight months of the year, the increase of 1921 over the median is 53 per cent in 42 States.

Although morbidity figures are not complete, and some increase may be accounted for by better reporting than was secured a few years ago, still the figures indicate a decided increase in the number of cases of diphtheria, especially in the North Central States.

In the table, blanks indicate that reports have not as yet been received.

Cases of diphtheria reported to State health officers January to September, 1921, and median number of cases, 1913-1920.

	Cases reported during—									Total.
	Janu- ary.	Febru- ary.	March.	April.	May.	June.	July.	August.	Septem- ber.	
Alabama:										
1921.....	42	48	41	25	29	28	50	214	244	721
Median (7 years)	50	34	38	28	19	19	31	65	147	431
Arizona:										
1921.....	15	7	7	5	7	2	2	5		
Median (4 years)	5	4	3	4	4	2	3	2	2	29
Arkansas:										
1921.....	123	67	39	24	17	18	40	78	75	481
Median (4 years)	23	21	17	13	12	5	4	18	50	163
California:										
1921.....	593	518	675	615	576	661	398	592		
Median (8 years)	324	272	257	240	259	220	176	168	170	2,086
Colorado:										
1921.....	232	138	141	113	214	160	143	188		
Median (6 years)	41	31	48	32	45	40	45	40	65	407
Connecticut:										
1921.....	430	387	294	197	174	204	149	153	226	2,211
Median (8 years)	289	205	194	179	168	146	133	105	174	1,593
Delaware:										
1921.....	22	11	17	27	14	6	10	12	15	134
1920.....	41	14	23	21	17	12	5	9	9	151
Dist. of Columbia:										
1921.....	106	131	64	33	31	33	14	9	49	470
Median (8 years)	63	42	46	44	47	26	19	17	31	335
Florida:										
1921.....	77	73	50	23	22	42	47	52	107	493
Median (1918-1920)	35	27	26	14	13	19	15	21	60	230
Hawaii:										
1921.....	10	12	17	7	26	22	18	13	12	137
Median (7 years)	17	15	17	12	11	11	10	10	10	113
Idaho:										
1921.....	17	9	4	5	13	11	8	9	28	104
Average (1913 and 1920).....	1	10	3	3	3	5	4	7	17	53
Illinois:										
1921.....	1,871	1,342	1,332	1,205	1,094	921	745	537	1,606	10,953
Median (6 years)	1,148	812	1,014	763	752	645	603	498	759	6,994
Indiana:										
1921.....	300	276	247	314	220	165	183	242	870	2,817
Median (8 years)	341	254	188	148	124	104	122	170	254	1,705
Iowa:										
1921.....	143	133	102	140	92	68	53		281	
Median (7 years)	88	65	51	46	68	46	39	32	59	491
Kansas:										
1921.....	514	393	246	185	142	113	184	235	1,076	2,998
Median (8 years)	180	87	93	85	72	59	59	59	113	810
Louisiana:										
1921.....	67	72	38	39	31	21	47	32	69	410
Median (7 years)	84	67	51	52	41	39	44	60	79	508
Maine:										
1921.....	107	56	69	66	31	66	69	33	58	560
Median (5 years)	28	18	39	19	19	17	17	27	22	197
Maryland:										
1921.....	322	197	174	145	165	137	88	124	149	1,501
Median (6 years)	226	173	170	98	109	74	79	82	162	1,164
Massachusetts:										
1921.....	935	795	749	678	649	624	441	516	526	5,943
Median (8 years)	854	679	675	586	581	521	440	437	487	5,233
Michigan:										
1921.....	1,344	995	878	790	729	704	452	631	955	7,489
Median (8 years)	548	440	425	381	377	351	337	323	409	3,631
Minnesota:										
1921.....	331	257	245	256	242	180	163	204	431	2,312
Median (8 years)	317	232	253	243	300	227	224	239	231	2,299
Mississippi:										
1921.....	140	95	67	40	32	60	159	310	642	1,545
Median (7 years)	76	56	40	31	37	33	50	105	166	597
Montana:										
1921.....	42	35	29	27	24	22	14	16		
Median (7 years)	22	24	23	17	19	19	25	15	17	181
Nebraska:										
1921.....	85	56	49	68	90	35	44	85	184	653
Median (1918-1920).....	55	37	45	56	33	27	17	35	96	401
New Jersey:										
1921.....	966	815	796	666	665	548	338	344	434	5,476
Median (8 years)	624	507	482	454	515	430	361	293	416	4,086
New Mexico:										
1921.....	103	149	177	140	126	61	88	57		
1920.....	59	16	42	45	105	45	65	37	45	450

Cases of diphtheria reported to State health officers January to September, 1921, and median number of cases, 1913-1920—Continued.

	Cases reported during—									Total.
	January.	February.	March.	April.	May.	June.	July.	August.	September.	
New York:										
1921.....	3,493	3,354	2,887	2,504	2,362	2,260	1,111	1,078	.....	.....
Median (8 years).....	2,113	1,887	1,942	1,780	1,970	1,981	1,347	998	1,117	15,135
North Carolina:										
1921.....	202	122	127	91	72	60	151	535	1,160	2,520
Median (1918-1920).....	83	72	79	91	71	43	65	177	602	1,283
North Dakota:										
1921.....	172	94	66	43	49	29	60	48	52	613
Median (4 years).....	85	37	49	27	22	25	36	29	47	307
Ohio:										
1921.....	1,057	961	663	640	657	569	512	842	2,077	7,978
Median (7 years).....	681	563	590	410	392	361	330	392	709	4,428
Oklahoma:										
1921.....	126	61	56	19	38	20	18	52	176	566
Median (1913, 1915, 1917).....	88	71	56	49	32	15	27	45	82	465
Oregon:										
1921.....	86	173	79	64	48	55	133	80	121	839
Median (8 years).....	27	22	20	19	25	23	13	15	18	182
Pennsylvania:										
1921.....	1,982	1,802	1,729	1,343	1,354	1,132	816	1,142	1,540	12,940
Median (8 years).....	1,524	1,225	1,152	1,027	902	850	780	834	1,327	9,621
Rhode Island:										
1921.....	114	163	114	94	117	47	51	31	57	728
Median (6 years).....	112	108	94	77	86	68	55	54	69	723
South Carolina:										
1921.....	129	122	229	43	69	64	116	275	578	1,625
Median (8 years).....	97	75	70	63	47	48	52	154	329	935
South Dakota:										
1921.....	23	43	45	59	17	25	30	20	59	321
Median (6 years).....	28	14	21	22	15	17	26	23	14	180
Vermont:										
1921.....	19	21	25	27	18	20	22	.....	43	.....
Median (7 years).....	37	17	17	25	18	13	22	20	26	195
Virginia:										
1921.....	439	247	178	93	90	119	216	471	.....	.....
Median (8 years).....	223	147	103	81	67	51	65	181	420	1,338
Washington:										
1921.....	135	118	98	79	99	79	76	53	109	846
Median (8 years).....	64	51	49	44	48	36	35	33	39	399
West Virginia:										
1921.....	263	158	142	100	61	66	92	175	400	1,457
Median (4 years).....	66	56	49	41	43	35	41	68	159	558
Wisconsin:										
1921.....	672	483	333	278	279	203	180	237	320	2,085
Median (8 years).....	237	161	147	159	159	129	137	138	156	1,423
Wyoming:										
1921.....	6	13	10	11	14	2	4	4	19	83
Median (8 years).....	5	8	4	4	1	1	3	1	9	36
Total:										
1921.....	17,885	14,858	13,232	11,312	10,807	9,662	7,532	10,034	.....	.....
Median.....	10,950	8,636	8,699	7,553	7,640	6,845	6,000	5,997	9,176	71,516
Annual rate per 100,000 population:										
1921.....	235	156	174	149	142	127	99	132	.....	.....
Median.....	152	120	121	105	106	95	83	83	128	110

¹ Iowa and Vermont not included.

DEATHS DURING WEEK ENDED OCT. 15, 1921.

Summary of information received by telegraph from industrial insurance companies for week ended Oct. 15, 1921, and corresponding week, 1920. (From the Weekly Health Index, Oct. 18, 1921, issued by the Bureau of the Census, Department of Commerce.)

	Week ended Oct. 15, 1921.	Corresponding week, 1920.
Policies in force.....	47,875,785	44,752,436
Number of death claims.....	6,833	6,841
Death claims per 1,000 policies in force.....	7.4	8.0

Deaths from all causes in certain large cities of the United States during the week ended Oct. 15, 1921, infant mortality, annual death rate, and comparison with corresponding week of preceding years. (From the Weekly Health Index, Oct. 18, 1921, issued by the Bureau of the Census, Department of Commerce.)

City.	Estimated population July 1, 1921.	Week ended Oct. 15, 1921.		Average annual death rate per 1,000. ²	Deaths under 1 year.		Infant mortality rate, week ended Oct. 15, 1921. ³
		Total deaths.	Death rate. ¹		Week ended Oct. 15, 1921.	Previous year or years. ²	
Akron, Ohio.....	229,195	28	6.4	* 8.8	5	* 3	48
Albany, N. Y.....	115,071	26	11.8	C 11.0	3	C 2	67
Atlanta, Ga.....	207,473	50	12.6	C 15.9	2	C 10	.....
Baltimore, Md.....	752,863	196	13.6	A 14.7	40	A 37	112
Birmingham, Ala.....	186,133	55	15.4	A 16.2	7	A 8	.....
Boston, Mass.....	757,634	183	12.6	A 15.7	22	A 41	59
Bridgeport, Conn.....	149,967	21	7.3	A 13.0	3	A 8	38
Buffalo, N. Y.....	519,608	114	11.4	C 12.3	15	C 37	58
Cambridge, Mass.....	110,444	22	10.4	A 11.2	4	A 3	72
Camden, N. J.....	119,672	32	13.9	.....	8	.....	119
Chicago, Ill.....	2,780,655	564	10.6	A 13.1	85	A 132	.....
Cincinnati, Ohio.....	403,418	97	12.5	C 14.4	11	C 11	73
Cleveland, Ohio.....	831,138	161	10.1	C 10.6	25	C 30	67
Columbus, Ohio.....	245,358	74	15.7	C 11.7	9	C 7	104
Dallas, Tex.....	165,282	40	12.6	A 12.1	6	A 5	.....
Dayton, Ohio.....	158,119	36	11.9	C 9.1	8	C 12	131
Denver, Colo.....	263,152	64	12.7	A 11.5	6	.....	.....
Detroit, Mich.....	1,070,450	184	9.0	C 10.5	44	C 62	83
Fall River, Mass.....	120,068	25	10.8	C 16.0	9	C 14	135
Grand Rapids, Mich.....	141,197	40	14.8	C 7.9	10	C 3	109
Houston, Tex.....	114,340	40	15.5	.....	1	.....	.....
Indianapolis, Ind.....	325,215	76	12.2	C 9.0	15	C 10	117
Jersey City, N. J.....	362,788	54	9.3	C 11.3	7	C 15	48
Kansas City, Kans.....	103,884	31	17.1	C 14.3	4	C 3	95
Kansas City, Mo.....	336,137	114	17.7	C 16.2	21	C 13	.....
Los Angeles, Calif.....	611,021	147	12.5	A 10.4	15	A 12	71
Louisville, Ky.....	235,083	81	17.9	C 15.1	11	C 9	127
Lowell, Mass.....	113,757	17	7.8	A 18.1	2	A 11	53
Memphis, Tenn.....	165,389	45	14.2	.....	24	A 21	116
Milwaukee, Wis.....	468,386	94	10.5	A 10.6	2	A 2	46
Minneapolis, Minn.....	392,815	83	11.0	C 11.0	8	C 12	.....
Nashville, Tenn.....	122,036	35	15.0	C 13.6	4	C 2	.....
New Bedford, Mass.....	125,012	28	11.7	A 13.8	11	A 11	169
New Haven, Conn.....	157,907	33	10.3	C 10.2	6	C 8	71
New Orleans, La.....	394,657	126	16.6	A 18.7	19	A 11	.....
New York, N. Y.....	5,731,867	1,019	9.2	C 9.3	154	C 185	69
Newark, N. J.....	424,885	72	8.8	C 8.7	14	C 12	62
Norfolk, Va.....	121,200	23	9.9	A 9.8	6	A 3	106
Oakland, Calif.....	226,472	39	9.0	.....	5	.....	63
Omaha, Nebr.....	197,066	64	16.9	.....	10	.....	115
Paterson, N. J.....	137,463	31	12.9	.....	8	.....	135
Philadelphia, Pa.....	1,896,212	386	10.8	* 14.2	60	* 85	72
Pittsburgh, Pa.....	602,452	125	10.8	C 11.2	20	C 30	71
Portland, Oreg.....	264,850	63	12.1	C 9.2	5	C 5	50
Providence, R. I.....	219,645	56	12.2	C 11.2	10	C 11	81
Richmond, Va.....	176,686	49	14.5	C 18.1	9	C 12	110
Rochester, N. Y.....	306,229	67	11.4	C 10.1	9	C 15	70
St. Louis, Mo.....	786,164	164	10.9	C 11.2	13	C 25	.....
St. Paul, Minn.....	237,781	46	10.1	C 10.8	0	C 8	0
Salt Lake City, Utah.....	121,595	25	10.7	A 13.8	5	.....	77
San Francisco, Calif.....	520,546	94	9.4	C 14.6	6	C 5	35
Seattle, Wash.....	327,227	48	7.6	A 7.3	3	A 5	25
Springfield, Mass.....	135,877	28	10.7	C 9.1	3	C 1	45
Syracuse, N. Y.....	177,265	36	10.6	C 14.1	9	C 10	108
Toledo, Ohio.....	253,696	62	12.7	A 13.7	6	A 10	60
Trenton, N. J.....	122,760	40	17.0	A 17.7	8	A 10	122
Washington, D. C.....	454,026	112	12.9	A 14.1	10	A 15	58
Wilmington, Del.....	113,408	16	7.4	C 8.4	3	.....	.....
Worcester, Mass.....	184,972	55	15.5	C 15.2	11	C 5	114
Yonkers, N. Y.....	103,324	13	6.6	A 12.6	2	A 7	45

¹ Annual rate per 1,000 population.

² "A" indicates data for the corresponding week of the years 1913 to 1917, inclusive. "C" indicates data for the corresponding week of the year 1920.

³ Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1920. Cities left blank are not in the registration area for births.

⁴ Data based on statistics of 1915, 1916, and 1917.

PREVALENCE OF DISEASE.

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring.

UNITED STATES.

CURRENT STATE SUMMARIES.

Telegraphic Reports for Week Ended Oct. 22, 1921.

These reports are preliminary and the figures are subject to change when later returns are received by the State health officers.

ALABAMA.		Cases.	CALIFORNIA—continued.		Cases.
Chicken pox.....		3	Poliomyelitis:		
Diphtheria.....		93	Grass Valley.....		3
Hookworm disease.....		5	Los Angeles.....		2
Influenza.....		9	Red Bluff.....		1
Malaria.....		15	Sacramento.....		1
Ophthalmia neonatorum.....		1	San Bernardino.....		1
Pellagra.....		39	San Francisco.....		2
Scarlet fever.....		36	Smallpox:		
Smallpox.....		5	Los Angeles.....		17
Tuberculosis.....		10	San Jose.....		8
Typhoid fever.....		12	Scattering.....		29
			Typhoid fever.....		22
ARKANSAS.			COLORADO.		
Chicken pox.....		4	(Exclusive of Denver.)		
Diphtheria.....		53	Chicken pox.....		4
Influenza.....		9	Diphtheria.....		39
Malaria.....		195	Mumps.....		2
Ophthalmia neonatorum.....		1	Poliomyelitis.....		4
Pellagra.....		7	Scarlet fever.....		25
Poliomyelitis.....		1	Smallpox.....		3
Scarlet fever.....		19	Tuberculosis.....		23
Trachoma.....		1	Typhoid fever.....		20
Tuberculosis.....		13	Whooping cough.....		2
Typhoid fever.....		29			
Whooping cough.....		1			
CALIFORNIA.			CONNECTICUT.		
Cerebrospinal meningitis:			Cerebrospinal meningitis.....		1
Manteca.....		1	Chicken pox.....		21
San Francisco.....		1	Diphtheria:		
Influenza.....		8	Bridgeport.....		16
Lethargic encephalitis:			Hartford.....		14
Sacramento.....		1	Branford.....		9
San Francisco.....		1	Scattering.....		51

CONNECTICUT—continued.

	Cases.
German measles.....	1
Impetigo contagiosa.....	1
Influenza.....	4
Lethargic encephalitis.....	4
Measles:	
Willimantic.....	37
Scattering.....	14
Mumps.....	7
Pneumonia (lobar).....	10
Poliomyelitis.....	4
Scarlet fever:	
Torrington (B).....	11
Scattering.....	52
Tuberculosis (all forms).....	35
Typhoid fever.....	7
Whooping cough.....	24

DELAWARE.

Chicken pox.....	4
Diphtheria.....	13
Malaria.....	3
Measles.....	1
Mumps.....	1
Pneumonia.....	3
Scarlet fever.....	9
Tuberculosis.....	8
Typhoid fever.....	8
Whooping cough.....	1

FLORIDA.

Diphtheria.....	34
Dengue ¹	26
Influenza.....	8
Leprosy.....	1
Malaria.....	21
Ophthalmia neonatorum.....	1
Pneumonia.....	3
Scarlet fever.....	2
Smallpox.....	1
Trachoma.....	1
Typhoid fever.....	6

GEORGIA.

Diphtheria.....	67
Hookworm disease.....	38
Influenza.....	12
Malaria.....	34
Measles.....	2
Mumps.....	1
Pneumonia.....	9
Scarlet fever.....	29
Septic sore throat.....	3
Smallpox.....	6
Tuberculosis (pulmonary).....	4
Typhoid fever.....	28
Whooping cough.....	5

IDAHO.

Chicken pox.....	1
Diphtheria.....	2
Measles.....	1
Poliomyelitis.....	3
Scarlet fever.....	8
Smallpox.....	1
Typhoid fever.....	5

ILLINOIS.

	Cases.
Cerebrospinal meningitis:	
Chicago.....	1
Dixon.....	1
Mount Morris.....	1
Royalton.....	1
Diphtheria:	
Aurora.....	23
Bloomington.....	13
Carbondale.....	8
Chicago.....	263
Cicero.....	14
Decatur.....	14
Joliet.....	9
Mattoon.....	16
Rockford.....	21
Streator.....	17
Scattering.....	299

Influenza.....	14
Lethargic encephalitis—Chicago.....	1
Pneumonia.....	154

Poliomyelitis:

Chicago.....	8
Cicero.....	1
Cook County—New Trier Township.....	1
Effingham County—Bishop Township.....	1
Erie.....	1
Graysville.....	1
Joliet.....	1
Macomb.....	1
McDonough County—Scotland Township.....	1
Montgomery County—South Litchfield Township.....	1
Ogle County—Pine Creek Township.....	1
Peoria.....	1
Rock Falls.....	1
St. Clair County—O'Fallon Township.....	1
Sangamon County—Clear Lake Township.....	1
Tazewell County—Morton Township.....	1

Scarlet fever:

Chicago.....	92
Peoria.....	12
Waukegan.....	9
Scattering.....	165

Smallpox.....	2
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Typhoid fever:

Chicago.....	13
Scattering.....	59
Whooping cough.....	45

INDIANA.

Diphtheria.....	403
Poliomyelitis:	
Clinton County.....	1
Hendricks County.....	1
Putnam County.....	1
St. Joseph County.....	2
Steuben County.....	1
White County.....	1
Rabies in animals—Switzerland County.....	1
Scarlet fever.....	163
Smallpox.....	2
Typhoid fever.....	52

¹22 cases were reported for week ended Oct. 15.

IOWA.		MASSACHUSETTS.	
	Cases.		Cases.
Diphtheria.....	66	Cerebrospinal meningitis.....	4
Poliomyelitis:		Chicken pox.....	55
Elkhart.....	1	Conjunctivitis (suppurative).....	16
Grinnell.....	1	Diphtheria.....	228
Oakland.....	2	Dysentery.....	2
Scarlet fever.....	145	German measles.....	2
Smallpox.....	10	Influenza.....	11
KANSAS.		Lethargic encephalitis.....	3
Cerebrospinal meningitis.....	1	Malaria.....	2
Chicken pox.....	21	Measles.....	58
Diphtheria.....	672	Mumps.....	31
German measles.....	1	Ophthalmia neonatorum.....	18
Lethargic encephalitis.....	1	Pneumonia (lobar).....	41
Measles.....	3	Poliomyelitis.....	5
Mumps.....	1	Scarlet fever.....	126
Pneumonia.....	7	Septic sore throat.....	5
Poliomyelitis.....	7	Smallpox.....	1
Scarlet fever.....	237	Tetanus.....	3
Smallpox.....	4	Tuberculosis (all forms).....	192
Trachoma.....	5	Typhoid fever.....	34
Tuberculosis.....	49	Whooping cough.....	36
Typhoid fever.....	26	MINNESOTA.	
Whooping cough.....	14	Chicken pox.....	3
LOUISIANA.		Diphtheria:	
Cerebrospinal meningitis.....	1	Minneapolis.....	108
Diphtheria.....	46	Scattering.....	65
Influenza.....	8	Measles.....	8
Lethargic encephalitis.....	1	Poliomyelitis.....	17
Poliomyelitis.....	1	Scarlet fever.....	160
Scarlet fever.....	14	Smallpox.....	9
Typhoid fever.....	33	Tuberculosis.....	65
MAINE.		Typhoid fever.....	16
Chicken pox.....	8	MISSISSIPPI.	
Diphtheria.....	19	Diphtheria.....	72
Influenza.....	1	Scarlet fever.....	16
Measles.....	6	Typhoid fever.....	16
Pneumonia.....	3	MISSOURI.	
Scarlet fever.....	35	Cerebrospinal meningitis.....	1
Tuberculosis.....	9	Chicken pox.....	31
Typhoid fever.....	21	Diphtheria.....	404
Whooping cough.....	1	Epidemic sore throat.....	13
MARYLAND. ²		Influenza.....	5
Cerebrospinal meningitis.....	1	Measles.....	3
Chicken pox.....	9	Poliomyelitis.....	5
Diphtheria.....	91	Scarlet fever.....	168
Dysentery.....	3	Smallpox.....	22
German measles.....	2	Tetanus.....	1
Influenza.....	15	Trachoma.....	6
Malaria.....	9	Tuberculosis.....	30
Measles.....	29	Typhoid fever.....	47
Mumps.....	8	Whooping cough.....	36
Ophthalmia neonatorum.....	4	MONTANA.	
Pneumonia (all forms).....	36	Diphtheria.....	13
Poliomyelitis.....	9	Poliomyelitis—Livingston.....	1
Scarlet fever.....	83	Scarlet fever.....	10
Septic sore throat.....	8	Smallpox.....	57
Tetanus.....	1	Typhoid fever.....	2
Trachoma.....	1	NEBRASKA.	
Tuberculosis.....	47	Chicken pox.....	3
Typhoid fever.....	42	Diphtheria:	
Whooping cough.....	29	Omaha.....	47
		Wymore.....	10
		Scattering.....	21

² Week ended Friday.

NEBRASKA—continued.

	Cases.
Influenza.....	1
Measles.....	6
Mumps.....	9
Poliomyelitis:	
Arcadia.....	2
Bradshaw.....	1
Cedar County.....	3
Giltner.....	1
Lincoln.....	1
Minden.....	1
York County.....	1
Scarlet fever:	
Gage County.....	11
Scattering.....	45
Smallpox.....	4
Tuberculosis.....	3
Typhoid fever.....	13
Whooping cough.....	1

NEW JERSEY.

Chicken pox.....	47
Diphtheria.....	161
Malaria.....	5
Measles.....	31
Pneumonia.....	58
Poliomyelitis.....	6
Scarlet fever.....	123
Smallpox—Reported in Camden County.	
Typhoid fever.....	32
Whooping cough.....	39

NEW MEXICO.

Conjunctivitis.....	6
Diphtheria.....	55
Pneumonia.....	2
Scarlet fever.....	13
Tuberculosis.....	30
Typhoid fever.....	14
Whooping cough.....	2

NEW YORK.

(Exclusive of New York City.)

Diphtheria.....	312
Influenza.....	11
Lethargic encephalitis.....	1
Measles.....	47
Pneumonia.....	119
Poliomyelitis.....	20
Scarlet fever.....	235
Tetanus.....	1
Typhoid fever.....	102
Whooping cough.....	102

NORTH CAROLINA.

Cerebrospinal meningitis.....	3
Chicken pox.....	21
Diphtheria.....	320
German measles.....	5
Measles.....	5
Ophthalmia neonatorum.....	2
Poliomyelitis.....	1
Scarlet fever.....	179
Septic sore throat.....	10
Smallpox.....	4
Trachoma.....	3
Typhoid fever.....	31
Whooping cough.....	97

OREGON.

	Cases.
Chicken pox.....	16
Diphtheria:	
Portland.....	28
Scattering.....	5
Measles.....	1
Mumps.....	2
Poliomyelitis:	
Bend.....	1
Douglas.....	3
Newberg.....	2
Scarlet fever.....	11
Smallpox.....	1
Tuberculosis.....	18
Typhoid fever.....	2

SOUTH DAKOTA.

Diphtheria.....	15
Measles.....	2
Scarlet fever.....	25
Smallpox.....	4
Typhoid fever.....	2
Whooping cough.....	3

TEXAS.

Chicken pox.....	4
Diphtheria.....	22
Pellagra.....	4
Scarlet fever.....	10
Typhoid fever.....	8
Whooping cough.....	7

VERMONT.

Chicken pox.....	22
Diphtheria.....	20
Measles.....	4
Mumps.....	9
Pneumonia.....	2
Poliomyelitis.....	1
Scarlet fever.....	40
Typhoid fever.....	2
Whooping cough.....	5

WASHINGTON.

Cerebrospinal meningitis—Cowlitz County.....	1
Chicken pox.....	94
Diphtheria.....	40
Measles.....	7
Mumps.....	17
Poliomyelitis:	
Benton City.....	1
Chelan.....	1
Enumclaw.....	4
Kelso.....	1
King County.....	4
Puyallup.....	2
Seattle.....	7
Snohomish.....	1
Tacoma.....	1
Scarlet fever:	
Spokane.....	17
Scattering.....	8
Smallpox:	
Tacoma.....	20
Scattering.....	31
Tuberculosis.....	25
Typhoid fever.....	14

WEST VIRGINIA.		WISCONSIN—continued.	
Diphtheria:	Cases.	Milwaukee—Continued.	Cases.
Charleston.....	11	Tuberculosis.....	13
Elkins.....	26	Whooping cough.....	12
Huntington.....	15	Scattering:	
Wheeling.....	16	Cerebrospinal meningitis.....	4
Scattering.....	36	Chicken pox.....	44
Scarlet fever.....	30	Diphtheria.....	172
Smallpox.....	6	German measles.....	1
Typhoid fever.....	6	Influenza.....	9
		Lethargic encephalitis.....	2
		Measles.....	14
WISCONSIN.		Poliomyelitis.....	5
Milwaukee:		Scarlet fever.....	159
Chicken pox.....	18	Smallpox.....	8
Diphtheria.....	34	Tuberculosis.....	18
Measles.....	1	Typhoid fever.....	18
Pneumonia.....	3	Whooping cough.....	46
Scarlet fever.....	25		
Smallpox.....	4		

Reports for Week Ended Oct. 15, 1921.

DISTRICT OF COLUMBIA.		KENTUCKY—continued.	
	Cases.		Cases.
Diphtheria.....	21	Dysentery.....	6
Influenza.....	1	Influenza.....	1
Measles.....	3	Malaria.....	2
Poliomyelitis.....	4	Measles.....	4
Scarlet fever.....	8	Mumps.....	2
Smallpox.....	2	Pneumonia.....	9
Tuberculosis.....	18	Scarlet fever.....	33
Typhoid fever.....	7	Septic sore throat.....	2
Whooping cough.....	4	Smallpox.....	1
		Tetanus.....	1
KENTUCKY.		Tonsillitis.....	6
Chicken pox.....	3	Trachoma.....	48
Diphtheria:		Tuberculosis:	
Daviess County.....	35	Jefferson County.....	9
Jefferson County.....	72	Scattering.....	4
Laurel County.....	10	Typhoid fever:	
Marshall County.....	10	Perry County.....	10
Muhlenberg County.....	16	Scattering.....	32
Ohio County.....	12	Whooping cough.....	2
Scattering.....	54		

SUMMARY OF CASES REPORTED MONTHLY BY STATES.

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week:

State.	Cerebrospinal meningitis.	Diphtheria.	Influenza.	Malaria.	Measles.	Pellagra.	Poliomyelitis.	Scarlet fever.	Smallpox.	Typhoid fever.
<i>September, 1921</i>										
Idaho.....		28			4		16	13	2	19
Indiana.....	4	870			29		32	224	26	245
Iowa.....	5	281			2		53	179	11	
Louisiana.....		69	6	277	21	50	1	16		113
Maine.....	2	58	1		21		9	56	5	49
Maryland.....	2	149	11	78	28	1	56	133		277
Minnesota.....	4	434			21		129	301	53	64
New Jersey.....	8	434	9	10	40		56	242		255
Pennsylvania.....	9	1,640		4	128	1	62	951		988
Rhode Island.....	1	57	1	2	4		2	44		18
South Dakota.....	2	39			3		5	58	25	16
Wisconsin.....	6	320	30		19		66	326	46	58

RECIPROCAL NOTIFICATION.

Minnesota—September, 1921.

Cases of communicable diseases referred during September, 1921, to other State health departments by the Department of Health of the State of Minnesota.

Disease and locality of notification.	Referred to health authority of—	Why referred.
Typhoid fever: Barnesville, Clay County..	Devils Lake, Ramsey County, N. Dak.	Patient contracted disease while working for Great Northern Ry. at Devils Lake, N. Dak.
Poliomyelitis: City and County Hospital, St. Paul, Ramsey County.	Hammond, St. Croix County, Wis...	Patient, whose home is in Hammond, Wis., came to City and County Hospital with poliomyelitis.
Tuberculosis: Sunnyrest Sanatorium, Crookston, Polk County.	Cassellton, Cass County, N. Dak.	Patient left sanatorium for home as an unimproved case of pulmonary tuberculosis.
Sand Beach Sanatorium, Lake Park, Becker County.	Lamoure, Lamoure County, N. Dak.	Fatal case of tuberculosis removed to his home at Lamoure, N. Dak.
Minnesota State Sanatorium, Cass County.	Bismarek, Burleigh County, N. Dak.	A quiescent pulmonary case of tuberculosis left sanatorium for his home.
Oronoco Sanatorium, Rochester, Olmsted County.	Rapid City, Pennington County, S. Dak.; Bowdoin, Phillips County, Mont.	2 open cases left sanatorium for their homes.
Thomas Hospital, Minneapolis, Hennepin County	Chicago, Cook County, Ill. Cascade, Cascade County, Mont. Wyndmere, Richland County, N. Dak. Tagus, Mountrail County, N. Dak. Almont, Morton County, N. Dak. McVie, Nelson County, N. Dak. Rock Lake, Towner County, N. Dak. Stanton, Mercer County, N. Dak. Belfield, Stark County, N. Dak. Galesburg, Traill County, N. Dak. Carthage, Miner County, S. Dak. Chicago, Cook County, Ill. (2 cases) ..	3 improved, 4 unimproved, 1 open, and 3 fatal cases left sanatorium for their homes.
Pokegama Sanatorium, Pokegama, Pine County.	Kensett, Worth County, Iowa (2 cases). Osage, Mitchell County, Iowa (2 cases). Ashland, Ashland County, Wis. (2 cases). Great Falls, Cascade County, Mont. Fresno, Hill County, Mont. Outlook, Sheridan County, Mont. Grand Forks, Grand Forks County, N. Dak. Buchanan, R. F. D. No. 1, Stutsman County, N. Dak. Dunseith, Rolette County, N. Dak. McGregor, Williams County, N. Dak. Kenmare, Ward County, N. Dak. Kramer, Bottineau County, N. Dak. Pukwana, Brule County, S. Dak. Carthage, Miner County, S. Dak. Rockham, Faulk County, S. Dak. Rapid City, Pennington County, S. Dak. Canton, Lincoln County, S. Dak. Lead, Lawrence County, S. Dak. Bristol, Day County, S. Dak. Yale, Payne County, Okla. Cherry, Bureau County, Ill. Chicago, Cook County, Ill. Coon Rapids, Carroll County, Iowa. Iowa Falls, Hardin County, Iowa. Gilmore City, Pocahontas County, Iowa. Allison, Butler County, Iowa. McPherson, McPherson County, Kans. Bessemer, Gokabee County, Mich. Kansas City, Jackson County, Mo. Pilot Grove, Cooper County, Mo.	6 far advanced and 2 moderately advanced cases left the sanatorium for their homes.
United States Public Health Service Hospital, No. 65, St. Paul, Ramsey County.		17 cases left hospital for their homes.
Mayo Clinic, Rochester, Olmsted County.		12 advanced cases, 10 moderately advanced, 2 incipient, 1 apparently arrested, 1, stage of disease not given, left clinic for their homes.

Cases of communicable diseases referred during September, 1921, to other State health departments by the Department of Health of the State of Minnesota—Continued.

Disease and locality of notification.	Referred to health authority of—	Why referred.
Tuberculosis—Continued. Mayo Clinic, Rochester, Olmsted County—Con.	Overton, R. F. D. No. 1, Dawson County, Nebr. Ravenna, Buffalo County, Nebr..... Roswell, Chaves County, N. Mex. ... Wahpeton, Richland County, N. Dak. Greenville, Darke County, Ohio.... Wagoner, Wagoner County, Okla.... Cheyenne, Roger Mills County, Okla.. Drumwright, Creek County, Okla.... Eufaula, McIntosh County, Okla.... Howard, Miner County, S. Dak..... Howell, Hand County, S. Dak. Sioux Falls, Minnehaha County, S. Dak. Aberdeen, Grays Harbor County, Wash. Chippewa Falls, Chippewa County, Wis. Gays Mills, Crawford County, Wis.. Prince Albert, Saskatchewan, Canada	

PLAGUE.

Rodent—Galveston, Tex.

On October 16, 1921, a rat, which was trapped September 12, 1921, in Galveston, was reported positive for plague.

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921.

ANTHRAX.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Massachusetts: Haverhill.....	1	.....	New York: Ithaca.....	1	1
			New York.....		1

CEREBROSPINAL MENINGITIS.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for pre- vious years.	Week ended Oct. 8, 1921.		City.	Median for pre- vious years.	Week ended Oct. 8, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
California: Los Angeles.....	0	2	.....	New Jersey: Bayonne.....	0	1	.....
San Francisco.....	0	1	.....	Jersey City.....	0	1	.....
Connecticut: Bridgeport.....	0	2	1	Passaic.....	0	1	.....
Illinois: Aurora.....	0	.....	1	New York: New York.....	3	2	1
Chicago.....	3	1	.....	Niagara Falls.....	0	1	.....
Kansas: Kansas City.....	0	1	.....	North Carolina: Raleigh.....	0	1	.....
Wichita.....	0	.....	1	Pennsylvania: Hazleton.....	.....	1	.....
Massachusetts: Boston.....	0	1	1	Philadelphia.....	1	1	1
Michigan: Detroit.....	0	1	.....	Rhode Island: Providence.....	0	1	.....

CITY REPORTS FOR WEEK ENDED OCT 8, 1921—Continued.

DIPHTHERIA.

See p. 2702; also Telegraphic weekly reports from States, p. 2690, and Monthly summaries by States, p. 2694.

INFLUENZA.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
California:			Massachusetts:		
Los Angeles.....	1	.....	Haverhill.....	2	.....
San Francisco.....	3	.....	Lynn.....	1	.....
Connecticut:			Minnesota:		
New Britain.....	3	.....	Minneapolis.....		1
Florida:			Missouri:		
Tampa.....	1	.....	Kansas City.....	1	.....
Georgia:			St. Joseph.....	1	.....
Atlanta.....	1	.....	New Jersey:		
Illinois:			Newark.....	1	.....
Chicago.....	12	3	New York:		
Kentucky:			New York.....	20	6
Covington.....	1	.....	Ohio:		
Maryland:			Hamilton.....	2	.....
Baltimore.....	1	.....	Pennsylvania:		
			Philadelphia.....	2	2

LEPROSY.

California:			New York:		
Los Angeles.....		1	New York.....	1	.....

LETHARGIC ENCEPHALITIS.

Nebraska:					
Omaha.....	1	1			

MALARIA.

Alabama:			Georgia—Continued.		
Anniston.....	5	.....	Macon.....		2
Birmingham.....	1	1	Savannah.....	1	.....
Montgomery.....	1	.....	Massachusetts:		
Arkansas:			Methuen.....	1	.....
Fort Smith.....	5	.....	Michigan:		
Little Rock.....	8	.....	Detroit.....	1	.....
California:			Holland.....	1	.....
Los Angeles.....	1	.....	Missouri:		
Connecticut:			Kansas City.....	1	.....
Greenwich.....	1	.....	New Jersey:		
Florida:			Morristown.....	1	1
Tampa.....	3	.....	Tennessee:		
Georgia:			Memphis.....	14	2
Atlanta.....	1	.....	Texas:		
Brunswick.....	10	.....	Dallas.....	2	.....

MEASLES.

See p. 2702; also Telegraphic weekly reports from States, p. 2690, and Monthly summaries by States, p. 2694.

PELLAGRA.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Alabama:			South Carolina:		
Montgomery.....	1	.....	Charleston.....		1
Tuscaloosa.....	1	.....	Tennessee:		
District of Columbia:			Memphis.....	1	.....
Washington.....	1	1	Virginia:		
North Carolina:			Petersburg.....		1
Raleigh.....		1			

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

PNEUMONIA (ALL FORMS).

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Alabama:			Massachusetts—Continued.		
Birmingham.....		4	Waltham.....		1
Arizona:			Webster.....		1
Tucson.....		2	Worcester.....	6	4
California:			Michigan:		
Alameda.....	1		Ann Arbor.....	1	
Long Beach.....		1	Detroit.....	26	12
Los Angeles.....	16	9	Flint.....	2	1
Oakland.....		3	Grand Rapids.....	1	
Pasadena.....	1		Hamtramck.....		1
Sacramento.....		3	Highland Park.....		1
San Bernardino.....		1	Kalamazoo.....		1
San Diego.....	2	1	Marquette.....		1
San Francisco.....	7	3	Pontiac.....	1	
Santa Cruz.....		1	Saginaw.....		1
Stockton.....		3	Minnesota:		
Colorado:			Duluth.....		1
Colorado Springs.....		1	Minneapolis.....		6
Denver.....		7	St. Paul.....		1
Pueblo.....		1	Missouri:		
Connecticut:			Kansas City.....	2	1
Hartford.....		1	St. Joseph.....		1
Manchester.....	2		Montana:		
Meriden.....	2	1	Great Falls.....		1
New Haven.....		4	Missoula.....	3	
New London.....		1	Nebraska:		
Norwalk.....		1	Lincoln.....		1
Waterbury.....	1		New Hampshire:		
Delaware:			Manchester.....		3
Wilmington.....		1	Nashua.....		1
District of Columbia:			New Jersey:		
Washington.....		5	Bloomfield.....	1	
Georgia:			Hackensack.....	1	
Atlanta.....		6	Jersey City.....	2	
Macon.....		3	Montclair.....	1	
Savannah.....		1	Newark.....	29	
Illinois:			Orange.....	2	1
Alton.....	1		Passaic.....	1	
Aurora.....		1	Paterson.....	1	
Chicago.....	90	25	Perth Amboy.....		1
Cicero.....	1		Trenton.....		2
Danville.....		1	New York:		
Decatur.....		2	Albany.....	5	
Freeport.....		1	Auburn.....		2
Oak Park.....	1		Buffalo.....	7	4
Quincy.....	1		Ithaca.....	2	
Indiana:			Lackawanna.....	2	1
Hammond.....		1	Lockport.....		1
Indianapolis.....		3	Middletown.....		2
Kokomo.....	1		Mount Vernon.....	3	
South Bend.....		2	New York.....	142	65
Kansas:			Niagara Falls.....	1	
Hutchinson.....	2		Rochester.....	9	1
Kansas City.....	1		Saratoga Springs.....	1	
Wichita.....		1	Schenectady.....	2	1
Kentucky:			Syracuse.....	5	3
Louisville.....		5	Troy.....		2
Louisiana:			White Plains.....	1	
New Orleans.....		5	Yonkers.....		2
Maine:			North Carolina:		
Auburn.....		1	Charlotte.....		1
Lewiston.....		1	Ohio:		
Maryland:			Akron.....	1	
Baltimore.....	16	13	Barberton.....		1
Massachusetts:			Canton.....		1
Arlington.....		1	Cincinnati.....		3
Attleboro.....		1	Cleveland.....	13	
Boston.....	15	12	Columbus.....		4
Cambridge.....	2		Dayton.....	1	
Easthampton.....	2		East Cleveland.....	2	
Fall River.....	2		Findlay.....	1	
Haverhill.....	1		Hamilton.....		1
Lawrence.....	2		Lima.....		1
Lowell.....		1	Marion.....	1	
Lynn.....	4		Salem.....		1
Malden.....	1		Toledo.....		1
Northampton.....		1	Zanesville.....		1
Peabody.....	1		Oregon:		
Pittsfield.....		2	Portland.....		2
Springfield.....	1				

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

PNEUMONIA (ALL FORMS)—Continued.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Pennsylvania:			Virginia:		
Philadelphia.....	30	19	Alexandria.....	1	.....
Rhode Island:			Danville.....		1
Providence.....		4	Richmond.....		2
South Carolina:			West Virginia:		
Charleston.....		1	Charleston.....		1
Tennessee:			Wheeling.....		1
Memphis.....		2	Wisconsin:		
Texas:			Green Bay.....		2
El Paso.....		1	Janessville.....		1
Utah:			Milwaukee.....	2	.....
Salt Lake City.....		2			
Vermont:					
Rutland.....		1			

POLIOMYELITIS (INFANTILE PARALYSIS).

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Oct. 8, 1921.		City.	Median for previous years.	Week ended Oct. 8, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
California:				Minnesota—Continued.			
San Francisco.....	0	2	1	St. Paul.....	0	4	1
Connecticut:				Missouri:			
Waterbury.....	0	1	1	Kansas City.....	1	6	.....
Georgia:				St. Louis.....	0	2	1
Atlanta.....	0	1	.....	New Jersey:			
Savannah.....	0	1	.....	Bayonne.....	0	2	.....
Idaho:				Irvington.....		1	.....
Boise.....		1	.....	Jersey City.....	0	1	.....
Illinois:				Montclair.....	0	1	.....
Chicago.....	3	9	2	Orange.....	0	1	.....
Elgin.....	0	1	.....	New York:			
Evanston.....	0	2	.....	Buffalo.....	0	1	.....
Pekin.....	0	1	1	Newburg.....	0	1	.....
Indiana:				New York.....	3	38	8
Ft. Wayne.....	0	1	1	Rochester.....	0	3	.....
Frankfort.....		2	1	Schenectady.....	0	1	.....
Kansas:				Syracuse.....	0	6	1
Kansas City.....	0	2	.....	Troy.....	0	1	.....
Topeka.....	0	1	.....	White Plains.....		1	.....
Maryland:				Ohio:			
Baltimore.....	0	16	.....	Akron.....	0	1	.....
Cumberland.....	0	1	.....	Cleveland.....	1	3	.....
Massachusetts:				Lorain.....	0	1	.....
Boston.....	1	1	1	Pennsylvania:			
Haverhill.....	0	1	.....	Bradford.....		3	.....
Holyoke.....	0	1	.....	Philadelphia.....	0	6	1
Lynn.....	0	1	.....	Virginia:			
Newton.....	0	1	.....	Richmond.....	0	1	.....
Springfield.....	0	1	.....	Washington:			
Michigan:				Aberdeen.....		1	.....
Detroit.....	0	6	1	Seattle.....	0	4	.....
Flint.....	0	1	.....	Spokane.....		3	.....
Highland Park.....	0	1	.....	Yakima.....		1	.....
Kalamazoo.....	0	1	.....	Wisconsin:			
Minnesota:				Kenosha.....	0	1	.....
Mankato.....		1	.....	Madison.....	0	1	.....
Rochester.....		1	1				

RABIES IN ANIMALS.

City.	Cases.	City.	Cases.
California:		Ohio:	
Los Angeles.....	5	Niles.....	1
Missouri:		Tennessee:	
Kansas City.....	2	Memphis.....	3

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

SCARLET FEVER.

See p. 2702; also Telegraphic weekly reports from States, p. 2690, and Monthly summaries by States, p. 2694.

SMALLPOX.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for previous years.	Week ended Oct. 8, 1921.		City.	Median for previous years.	Week ended Oct. 8, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
California:				Missouri:			
Bakersfield.....	0	1		Kansas City.....	1	2	4
Berkeley.....	0	2		Montana:			
Los Angeles.....	0	3		Great Falls.....	0	8	
Oakland.....	1	9		Missoula.....	0	1	
Riverside.....	0	1		New York:			
San Francisco.....	0	3		Jamestown.....	0	1	
Santa Cruz.....	0	2		Ohio:			
Florida:				Fremont.....	0	2	
Tampa.....		1		Springfield.....	0	1	
Georgia:				Oregon:			
Atlanta.....	1	2		Portland.....	2	1	
Indiana:				South Dakota:			
Bloomington.....	0	1		Sioux Falls.....	0	2	
Iowa:				Utah:			
Des Moines.....	1	1		Salt Lake City.....	0	4	
Mason City.....	0	2		Washington:			
Kansas:				Seattle.....	2	4	
Hutchinson.....	0	1		Spokane.....	6	2	
Kansas City.....	0	1		Tacoma.....	0	2	
Maine:				Vancouver.....	0	1	
Waterville.....		1		Walla Walla.....	0	1	
Michigan:				Wisconsin:			
Alpena.....		2		Janesville.....	0	1	
Minnesota:				Milwaukee.....	0	1	
Minneapolis.....	5	3		Racine.....	0		1
St. Paul.....	5	5		Superior.....	0	1	

TETANUS.

City.	Cases.	Deaths.	City.	Cases.	Deaths.
Alabama:			Indiana:		
Montgomery.....	1	1	Terre Haute.....		1
California:			Maine:		
Oakland.....		1	Portland.....		1
Colorado:			Massachusetts:		
Denver.....		1	Boston.....	1	1
District of Columbia:			New York:		
Washington.....		1	New York.....	2	

TUBERCULOSIS.

See p. 2702; also Telegraphic weekly reports from States, p. 2690.

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

TYPHOID FEVER.

The column headed "Median for previous years" gives the median number of cases reported during the corresponding weeks of the years 1915 to 1920, inclusive. In instances in which data for the full six years are incomplete, the median is that for the number of years for which information is available.

City.	Median for pre- vious years.	Week ended Oct. 8, 1921.		City.	Median for pre- vious years.	Week ended Oct. 8, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
Alabama:				Michigan—Continued.			
Birmingham.....	9	1		Kalamazoo.....	0	2	
Gadsden.....		1		Marquette.....	1	4	
Arkansas:				Saginaw.....	2	3	
Fort Smith.....	2	1		Minnesota:			
California:				St. Paul.....	3	12	3
Bakersfield.....	0		1	Missouri:			
Long Beach.....	0	1		Kansas City.....	3	4	
Los Angeles.....	2	2		St. Louis.....	10	5	
Oakland.....	2	1		Montana:			
Sacramento.....	2	2		Billings.....	0	1	
San Diego.....	1	1	1	Nebraska:			
San Francisco.....	3	1		Omaha.....	2	3	
Colorado:				New Jersey:			
Denver.....	5	1	1	East Orange.....	0	1	
Pueblo.....	2	1		Newark.....	4	6	
Trinidad.....	0	4		Paterson.....	0	3	
Connecticut:				Perth Amboy.....	0	1	
Hartford.....	3	3		Trenton.....	1	14	
New Haven.....	2	1		Union.....	0	1	
Waterbury.....	2	1		West New York.....	0	1	
Delaware:				New York:			
Wilmington.....	3	3		Buffalo.....	2	1	2
District of Columbia:				Elmira.....	1	14	1
Washington.....	9	3	1	Ithaca.....	0	2	
Georgia:				Lockport.....	0	1	
Atlanta.....	3	1		Mount Vernon.....	0	1	
Macon.....	0	2	1	New York.....	46	23	4
Savannah.....	0	2		Niagara Falls.....	1	1	
Illinois:				Olean.....	0		1
Alton.....	0	2	1	Rochester.....	4	1	
Chicago.....	13	8	1	Syracuse.....	3	3	
Cicero.....		1		Yonkers.....	0	1	
Freeport.....	0	1		Ohio:			
Galesburg.....	1	2		Akron.....	4	2	
Jacksonville.....	0	1		Bucyrus.....		1	
Kewanee.....	0	1		Chillicothe.....			2
Mattoon.....	2		1	Cincinnati.....	4	1	1
Springfield.....	1	6	1	Cleveland.....	6	3	
Indiana:				Cleveland Heights.....		1	
Fort Wayne.....	2		1	Columbus.....	2	11	
Huntington.....	0	1		Dayton.....	0	1	
Indianapolis.....	4	1	1	East Cleveland.....	0	1	
Kansas:				Findlay.....	0	2	
Coffeyville.....	1	1		Fremont.....	0	2	
Fort Scott.....	0	1		Marion.....	0	3	
Kansas City.....	1	8		Middletown.....	0	1	
Wichita.....	4	2	1	Toledo.....	4	2	2
Kentucky:				Oklahoma:			
Louisville.....	6	6		Oklahoma City.....	2	1	
Louisiana:				Oregon:			
New Orleans.....	3	4	1	Portland.....	2	1	
Maine:				Pennsylvania:			
Auburn.....	0	1		Allentown.....	1	2	
Maryland:				Bethlehem.....	1	2	
Baltimore.....	21	4		Connellsville.....	0	1	
Massachusetts:				Erie.....	0	1	
Adams.....	0	2		Harrisburg.....	2	1	
Boston.....	8	3	2	Lancaster.....	0	5	
Fall River.....	8	1		Lebanon.....	0	2	
Lawrence.....	1	2		Monessen.....	0	6	
Lowell.....	0	1	1	New Castle.....	1	1	
Medford.....	0	1		Philadelphia.....	24	21	
Somerville.....	0	1		Pittsburgh.....	8	7	
Taunton.....	1		1	Reading.....	3	4	
Watertown.....	0	1		Sunbury.....	1	1	
Michigan:				Wilkes-Barre.....	0	1	
Alpena.....			1	York.....	2	1	
Battle Creek.....	0	1					
Detroit.....	10	6	1				

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

TYPHOID FEVER—Continued.

City.	Median for pre- vious years.	Week ended Oct. 8, 1921.		City.	Median for pre- vious years.	Week ended Oct. 8, 1921.	
		Cases.	Deaths.			Cases.	Deaths.
Rhode Island:				Virginia—Continued.			
Pawtucket.....	0	2	.....	Petersburg.....	2	2	.....
Providence.....	2	1	1	Richmond.....	2	1	.....
South Carolina:				Roanoke.....	1	3	.....
Charleston.....	1	3	1	Washington:			
Tennessee:				Seattle.....	2	2	.....
Knoxville.....	1	1	.....	Tacoma.....	1	1	.....
Nashville.....	6	5	1	Vancouver.....	0	1	.....
Texas:				Walla Walla.....	1	2	.....
Dallas.....	2	3	.....	Yakima.....	2	2	.....
El Paso.....	0	2	1	West Virginia:			
Waco.....	1	2	.....	Bluefield.....	1	5	.....
Utah:				Charleston.....	1	1	.....
Salt Lake City.....	2	.....	1	Huntington.....	1	1	1
Vermont:				Martinsburg.....	6	3	.....
Burlington.....	0	1	.....	Parkersburg.....	0	.....	1
Virginia:				Wisconsin:			
Alexandria.....	0	3	.....	Ashland.....	0	1	.....
Danville.....	1	17	.....	Eau Claire.....	0	2	.....
Lynchburg.....	2	1	.....	Green Bay.....	0	1	.....
Norfolk.....	4	2	.....	Wausau.....	0	1	.....

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS.

City.	Population January 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Alabama:										
Anniston.....	17, 734		2							
Birmingham.....	178, 270	45	10						3	3
Gadsden.....	14, 737		17	1			2			
Mobile.....	60, 151	13	1				1		1	1
Montgomery.....	43, 464	9	8				1			2
Tuscaloosa.....	11, 996		4				3		1	
Arizona:										
Tucson.....	20, 292	19		1						3
Arkansas:										
Fort Smith.....	28, 811	6							2	
Hot Springs.....	11, 695	4								
Little Rock.....	64, 997		3							
California:										
Alameda.....	28, 806	6	1				1			
Bakersfield.....	18, 638	7								
Berkeley.....	35, 886	7							4	1
Eureka.....	12, 923	3								
Glendale.....	13, 536	8								2
Long Beach.....	55, 593	19	1		1				1	1
Los Angeles.....	576, 673	151	71	1	1		10		37	15
Oakland.....	216, 361	48	12				5		11	1
Pasadena.....	45, 354	7			2		3		2	1
Richmond.....	16, 843	2								
Riverside.....	19, 341	5	1						1	1
Sacramento.....	65, 857	22	7						3	
San Bernardino.....	18, 721	10								4
San Diego.....	74, 683	29	1		2		5		4	4
San Francisco.....	508, 410	119	40	2			7		24	11
Santa Cruz.....	10, 917	6								
Stockton.....	40, 296	7	7							
Colorado:										
Colorado Springs.....	39, 105	13							12	2
Denver.....	256, 399	66	22		2		8			7
Greeley.....	10, 883	4								1
Pueblo.....	42, 908		13							

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Connecticut:										
Bridgeport.....	143,538	24	11				1		3	1
Bristol.....	20,620	1								
Derby.....	11,234	6								1
Fairfield.....	11,475	2	2						1	
Greenwich.....	22,123		4						1	
Hartford.....	134,033	24	8				1		1	1
Manchester.....	18,370	2								
Meriden.....	31,739		8	1						
Milford.....	10,193	0	1							
New Britain.....	59,316	7	4				6			
New Haven.....	162,519	37	14	1			4		11	2
New London.....	25,688	7					1			
Norwalk.....	27,700	3								
Norwich.....	29,685	6							1	
Stonington.....	10,235	1								
Waterbury.....	91,410	14	2		1		3		3	1
Delaware:										
Wilmington.....	110,168	20	2				1			2
District of Columbia:										
Washington.....	437,571	94	16		2		3		27	12
Florida:										
Tampa.....	51,252	14	2						3	
Georgia:										
Atlanta.....	200,616	72	17	1			4		2	5
Brunswick.....	14,413	4								
Macon.....	52,995	21	5							2
Savannah.....	83,252	24	5	1			2		2	3
Valdosta.....	10,783	2	1							
Idaho:										
Boise.....	21,393	5	2				1			
Illinois:										
Alton.....	24,682	7							2	
Aurora.....	33,397	12	14	1						1
Bloomington.....	28,725	7	6				1		1	
Blue Island.....	11,424	2	2							
Centralia.....	12,491	2								
Chicago.....	2,701,705	504	259	15	9		83	4	199	29
Cicero.....	44,995	6	22	2					1	
Danville.....	33,750	6	1				3			
Decatur.....	43,818	10	6				3		2	
East St. Louis.....	66,740	16	4	1	1		3		1	
Elgin.....	27,454	5	3							1
Evanston.....	37,215	11	3				4			
Freeport.....	19,669	4	9							
Galesburg.....	23,834	6								1
Jacksonville.....	15,713	18			1					1
Kewanee.....	16,026	3	1				3			1
Mattoon.....	13,552	3	8				1			
Oak Park.....	39,830	6	2				2			
Pekin.....	12,086		7							
Peoria.....	76,121	13	11				9		2	2
Quincy.....	35,978	8					1		1	
Rock Island.....	35,177	8					2		1	
Springfield.....	59,183	12	1				4			4
Indiana:										
Bloomington.....	11,595	2	1				2			
Crawfordsville.....	10,139	2	1							
East Chicago.....	35,957	9		1						
Elkhart.....	24,277	6	1				3		1	
Evansville.....	85,264	14	6				3			
Fort Wayne.....	36,549	17	11	1			1			2
Frankfort.....	11,585	4					1		1	1
Gary.....	55,378	12	9				1			1
Hammond.....	36,004	13	2				4		1	1
Huntington.....	14,000	3	7	1			7			
Indianapolis.....	314,194	87	137	6	16		3		10	3
Kokomo.....	30,067	7					1			
La Fayette.....	22,486	4	3				1			
Logansport.....	21,626	4					1			
Marion.....	23,747	6	4	1					1	

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Indiana—Continued.										
Mishawaka.....	15,195	1	2				1		1	
Richmond.....	26,765	10	3				1			
South Bend.....	70,983	12	4				1		2	1
Terre Haute.....	66,083	15	61	2			5			
Iowa:										
Burlington.....	24,057	8	1							
Clinton.....	24,151		1							
Council Bluffs.....	36,162	15	1				1			1
Davenport.....	56,727		2				1			
Des Moines.....	126,468		20			10				
Dubuque.....	39,141		4							
Mason City.....	20,065	7					5			1
Muscatine.....	16,068	5								
Sioux City.....	71,227		5				1			
Kansas:										
Coffeyville.....	13,452	4	4							
Fort Scott.....	10,693	3	4				1			
Hutchinson.....	23,298		16				3			
Kansas City.....	101,177		14		1		3		3	
Lawrence.....	12,156	2	2	1			3			
Leavenworth.....	16,912		15							
Parsons.....	16,028	3	1				1			
Salina.....	15,085	3	2							
Topeka.....	50,022	16	58	1			8		3	1
Wichita.....	72,128	27	42	2			13		2	2
Kentucky:										
Covington.....	57,121	17	1				1			2
Lexington.....	41,534	15	3		1		5			3
Louisville.....	234,891	58	46		5		1	1	3	6
Paducah.....	24,735		4							
Louisiana:										
Lake Charles.....	13,088	7								1
New Orleans.....	387,219	103	9	1					23	9
Maine:										
Auburn.....	16,985	5	1				2		1	
Bath.....	11,731	5								
Biddeford.....	18,008	6	6							
Lewiston.....	31,791	9					2		1	1
Portland.....	69,272	24	15				1			
Sanford.....	10,691	1								
Waterville.....	13,351		2				1			
Maryland:										
Baltimore.....	733,826	198	38	1	4		15		23	18
Cumberland.....	29,837	10	6				9		2	
Massachusetts:										
Adams.....	12,967	1					1			
Amesbury.....	10,036	3	1							
Arlington.....	18,665	5							1	
Attleboro.....	19,731	3	1						1	1
Beverly.....	22,561	3								
Boston.....	748,060	170	30	1	23		11		35	15
Braintree.....	10,580	1								
Brockton.....	66,138	16	2				1			1
Brookline.....	37,748	9	1							
Cambridge.....	109,694	12	2		1		2		5	
Chelsea.....	43,184	9					6	2	2	2
Chicopee.....	36,214	10	2	1					1	
Clinton.....	12,979	5								
Dedham.....	10,792	1								
Easthampton.....	11,261		3				2			
Everett.....	40,120	2	4						3	
Fall River.....	120,485	35	5	1					6	2
Framingham.....	17,033	5	7				1			
Gardner.....	16,971	3					2		1	
Greenfield.....	15,462	3	1				1			
Haverhill.....	53,884	11	10	1			1			
Holyoke.....	60,203	15	4	1					1	1
Lawrence.....	94,270	20	8						8	
Leominster.....	19,744	8								
Lowell.....	112,479	23	4	1			1		2	1
Lynn.....	99,148	14	7		1		1		2	

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Massachusetts—Continued.										
Malden.....	49,103	9	2	1					1	
Medford.....	39,038	5	1		16				2	
Melrose.....	18,204	1	2				1		1	
Methuen.....	15,189	3					1		2	
New Bedford.....	121,217	20	10	1	1		4		4	2
Newburyport.....	15,618	1					1		1	
Newton.....	46,054	9	7						2	1
North Adams.....	22,282	8					2			
Northampton.....	21,951	9	1	1	1		1			1
Norwood.....	12,627	3	2							
Peabody.....	19,552	6								
Pittsfield.....	41,751	15	5				1			2
Plymouth.....	13,045	2								
Quincy.....	47,876	8	1		4					
Salem.....	42,529	9					1		1	1
Somerville.....	93,091	17	2				1		5	
Southbridge.....	14,245	2					2			
Springfield.....	129,563	34	5				6		7	1
Taunton.....	37,137	18	2							1
Warefield.....	13,025	5	1							1
Waltham.....	30,915	14			1					
Watertown.....	21,457	4	1		1					
Webster.....	13,258	3							1	
West Springfield.....	13,443	4					1	1		
Westfield.....	18,604	6		1						
Winthrop.....	15,455	1								
Woburn.....	16,574	4								
Worcester.....	179,754	39	1		3		2			4
Michigan:										
Alpena.....	11,101		2	1			6		1	
Ann Arbor.....	19,516	7			1		1		1	
Battle Creek.....	36,164		4				1			
Benton Harbor.....	12,233		2				2			
Detroit.....	993,739	185	75	5	10		32	2	26	13
Flint.....	91,599	13	31	1			12			
Grand Rapids.....	187,634	21	16	2	1		6		1	
Hamtramck.....	48,615	11	10	1						2
Highland Park.....	46,499	6	1		1		4			
Holland.....	12,166	2					5			
Ironwood.....	15,739	4								
Kalamazoo.....	48,858	17	13				3		2	1
Marquette.....	12,718	6								
Pontiac.....	34,273	7	12		1		5			1
Port Huron.....	25,941	7	1				1		2	
Saginaw.....	61,003	22	4	3	1		3			
Sault Ste. Marie.....	12,096	4					1			
Minnesota:										
Austin.....	10,118	5								
Duluth.....	98,917	7	21				5		8	
Minneapolis.....	380,582	94	55		2		42	2	12	3
Rochester.....	13,722	21	1							1
St. Cloud.....	15,873	1					10			
St. Paul.....	234,595	47	22	1	2		15		23	3
Winona.....	19,143		1				6			
Missouri:										
Independence.....	11,686	8								
Joplin.....	29,855		5				2			
Kansas City.....	324,410	78	49	4	1		13		4	9
Saint Joseph.....	77,939	27	6	1			6			1
Saint Louis.....	772,897	158	75	4	2		10	1	19	5
Springfield.....	39,631	13		1						3
Montana:										
Billings.....	15,100	3	1						1	
Great Falls.....	24,121	5	2							
Missoula.....	12,668	4							1	
Nebraska:										
Lincoln.....	54,934	17	1							1
Omaha.....	191,601	50	40	2	1		5			2
Nevada:										
Reno.....	12,016	4								

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
New Hampshire:										
Berlin.....	16, 104	2					1			
Concord.....	22, 167	7								
Dover.....	13, 029	0			1					
Keene.....	11, 210	0								
Manchester.....	78, 384	21	18	1	3		1			1
Nashua.....	28, 379	7	5							
New Jersey:										
Asbury Park.....	12, 400	5							1	
Bayonne.....	76, 754		3				1		1	
Bloomfield.....	22, 019	4	2		2		1			
Clifton.....	26, 470	5	3	2						
East Orange.....	50, 710		1				1		1	
Elizabeth.....	95, 682		1	1	1		7		2	1
Englewood.....	11, 627	3								
Garfield.....	19, 381	1							4	
Gloucester City.....	12, 162		3							
Hackensack.....	17, 667	3								
Harrison.....	15, 721								1	
Hoboken.....	68, 166	18	1				1			
Irvington.....	25, 480		1				7			
Jersey City.....	297, 864		17		2		7		8	
Kearny.....	26, 724	3	1				1		2	
Montclair.....	28, 810	4					1			
Morristown.....	12, 548	6	1							
New Brunswick.....	32, 779	8	6						3	2
Newark.....	414, 216		17		3		10		25	
Orange.....	33, 268	3	1				3			
Passaic.....	63, 824	15	1		1		3			
Paterson.....	135, 866		2	1	1		3	1	4	
Perth Amboy.....	41, 707	9	11	1			4			1
Phillipsburg.....	16, 923	4								
Plainfield.....	27, 700	7	12	1						
Rahway.....	11, 042	0	3							
Summit.....	10, 174	1	1						3	4
Trenton.....	119, 289	29	3	1			2			
Union.....	20, 651						2			
West Hoboken.....	40, 068	4					1		1	
West New York.....	29, 926	8								
West Orange.....	15, 573	0							1	
New Mexico:									6	9
Albuquerque.....	15, 157	14								
New York:									3	
Albany.....	113, 344		9							
Auburn.....	36, 192	11	5	1						
Buffalo.....	506, 775	101	26	2	2		11		30	8
Cohoes.....	22, 987	6								
Elmira.....	45, 305	10	1						2	
Geneva.....	14, 648	4								
Glens Falls.....	16, 638	10								
Ithaca.....	17, 004	8	6							
Jamestown.....	38, 917	14	7		1		4			
Lackawanna.....	17, 918	2	2				1		3	1
Lockport.....	21, 308	2	2				3			
Middletown.....	18, 420						1		2	1
Mount Vernon.....	42, 726	3	3				1	1	1	
Newburgh.....	30, 366	7								
New York.....	5, 621, 151	996	132	4	33		52		174	175
Niagara Falls.....	50, 760	10	6				7		1	1
Ogdensburg.....	14, 609	3								
Olean.....	20, 506	9								
Peekskill.....	15, 868	1	2				2			
Rochester.....	295, 750	56	24	1			4		4	4
Rome.....	26, 341	8	1							2
Saratoga Springs.....	13, 181	5							1	
Schenectady.....	88, 723	19	9				6		1	
Syracuse.....	171, 717	32	18		3		22		3	
Troy.....	72, 013	20	1				2		5	2
Watervliet.....	16, 073	2								
White Plains.....	21, 031	5								
Yonkers.....	100, 226	17	4				4			4

Pulmonary tuberculosis only.

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
North Carolina:										
Charlotte.....	46,338	11	19						4	1
Durham.....	21,719	4	1							
Greensboro.....	19,861	2								
Raleigh.....	24,418	6	12	1			1			
Rocky Mount.....	12,742	4								
Wilmington.....	33,372	10	1						1	
Winston-Salem.....	48,395	14	1				5		3	1
North Dakota:										
Fargo.....	21,961	0					5			
Grand Forks.....	14,010		1							
Ohio:										
Akron.....	208,435	33	39				21		5	
Barberton.....	18,811	9								1
Bucyrus.....	10,425	1					3			
Canton.....	87,091	22		1					1	
Chillicothe.....	15,831	6	11	1						
Cincinnati.....	401,247	92	43	1			4		11	11
Cleveland.....	790,836		52		7		36			
Cleveland Heights.....	15,236						5		1	
Columbus.....	237,031	61	75	2					4	3
Coshocton.....	10,847						2			
Dayton.....	152,359	40	3				9			
East Cleveland.....	27,292	3							2	
Findlay.....	17,021	1	2						1	
Fremont.....	12,468	2								
Hamilton.....	39,673	13	8				7	1	2	1
Ironton.....	14,007	1	3							
Kenmore.....	12,683		3							
Lancaster.....	14,706	3	4							
Lima.....	41,306	17	18						1	
Lorain.....	37,295		4				2			
Marion.....	27,891		9	1						
Middletown.....	23,594	4	9				1			
Newark.....	26,718	8	19				6			1
New Philadelphia.....	10,718		7							
Niles.....	13,080	2					1			
Norwood.....	24,966	5					1			
Piqua.....	15,044	4								
Salem.....	10,305	3								
Sandusky.....	22,897	3	2				4			
Springfield.....	60,840	14	129	1			2			
Steubenville.....	28,508	7	5				1			
Toledo.....	213,109	58	56	1			5		2	8
Zanesville.....	29,569	10	9						1	
Oklahoma:										
Oklahoma City.....	91,258	17	5	1			5		2	
Oregon:										
Portland.....	258,288	49	24	2			6		9	2
Pennsylvania:										
Allentown.....	73,502		7				3		2	
Altoona.....	60,331		11				1			
Berwick.....	12,181		1				1			
Bethlehem.....	50,358		5				1			
Bradford.....	20,879		1				2			
Bradford.....	15,525		3				1			
Canonsburg.....	10,632		1							
Carbondale.....	18,640		1							
Carnegie.....	11,516		2							
Carrick.....	10,504		1							
Charleroi.....	11,516		2				2			
Chester.....	58,030		2							
Connellsville.....	13,804		3						5	
Dickson City.....	11,049		2							
Donora.....	14,131		4							
Dubois.....	18,681		3							
Duquesne.....	19,011		2				7			
Erie.....	93,372		2				1		3	
Farrell.....	15,586		2		3		1			
Greensburg.....	15,033		2							
Harrisburg.....	75,917		2				3			
Hazleton.....	32,277		1				2			
Jeannette.....	10,627		2				1			
Johnstown.....	67,327		6						2	

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Pennsylvania—Continued.										
Lancaster.....	53,150		4				3			
Lebanon.....	24,643		2							
McKeesport.....	45,975		1				1		1	
McKee's Rocks.....	16,713		8							
Mahanoy City.....	15,599		1							
Monessen.....	18,179		2				1		1	
Nanticoke.....	22,614		2							
New Castle.....	44,938		2		1		4			
Norristown.....	32,319		1							
North Braddock.....	14,928		2				1			
Oil City.....	21,274		3						1	
Old Forge.....	12,237		2							
Philadelphia.....	1,823,158	399	42	1	3		58		46	33
Pittsburgh.....	588,193		39				27		20	
Plymouth.....	16,500		2							
Pottstown.....	17,431		3				1		1	
Pottsville.....	21,876								2	
Reading.....	107,784		9		1		3		9	
Scranton.....	137,783		7							
Shamokin.....	21,201		1							
Sharon.....	21,717		1		2					
Steelton.....	13,428		1							
Uniontown.....	15,692				1		2			
Warren.....	14,256		6				3			
Washington.....	21,480		3				1			
Wilkes-Barre.....	73,833		4							
Wilkesburg.....	24,403		1				1			
Williamsport.....	36,198		3				1			
Woodlawn.....	12,495		1				4			
York.....	47,512		7							
Rhode Island:										
Cranston.....	29,407	7	2							
Newport.....	30,255	3					2			
Pawtucket.....	64,248	10	5							
Providence.....	237,595	54	8				2			5
South Carolina:										
Charleston.....	67,957	19	3				7		2	4
Columbia.....	37,524		3				1			
South Dakota:										
Sioux Falls.....	25,176	5			3		2			
Tennessee:										
Chattanooga.....	57,895		7				1			
Knoxville.....	77,818		6	1			2		3	3
Memphis.....	162,351	47	17	2			2		5	3
Nashville.....	118,342	43	18	1			2		3	
Texas:										
Beaumont.....	40,422	12								
Corpus Christi.....	10,522	3								
Dallas.....	158,976	26	9		3				4	2
El Paso.....	77,543	42	1							3
Galveston.....	44,255	5	3							2
Waco.....	38,500	15	4				1			5
Utah:										
Salt Lake City.....	118,110	26	2				14			
Vermont:										
Barre.....	10,008						1			
Burlington.....	22,779	9	5				1			1
Rutland.....	14,954	3								
Virginia:										
Alexandria.....	18,060	7	1							1
Danville.....	21,539	4	4		3		1			
Lynchburg.....	29,956	7	1				1		2	
Norfolk.....	115,777		5				1		3	
Petersburg.....	31,002	6	3				1		2	1
Portsmouth.....	54,387	7	5							
Richmond.....	171,667	53	16	1	1				9	10
Roanoke.....	50,842	10	28	1			6			
Washington:										
Seattle.....	315,652		4		1		4			
Spokane.....	104,437		7		1		18			
Tacoma.....	96,965		2		1				6	
Vancouver.....	12,637		2							
Walla Walla.....	15,503		7						1	
Yakima.....	18,539		2							

CITY REPORTS FOR WEEK ENDED OCT. 8, 1921—Continued.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Continued.

City.	Popula- tion Janu- ary 1, 1920, subject to correction.	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
West Virginia:										
Bluefield.....	15,282	.....	7	.....	.....	.....	6	.....	.....	.....
Charleston.....	39,608	11	16	.....	.....	.....	2	.....	.....	.....
Fairmont.....	17,851	.....	2	.....	.....	.....	1	.....	.....	.....
Huntington.....	50,177	16	6	.....	.....	.....	.....	.....	.....	1
Martinsburg.....	12,515	.....	.....	.....	1	.....	.....	.....	.....	.....
Parkersburg.....	20,050	6	4	.....	.....	.....	.....	.....	.....	1
Wheeling.....	54,322	15	13	1	2	.....	4	.....	.....	.....
Wisconsin:										
Appleton.....	19,561	.....	1	.....	.....	.....	0	.....	.....	.....
Ashland.....	11,334	.....	.....	.....	.....	.....	1	.....	.....	.....
Beloit.....	21,284	3	2	.....	.....	.....	3	1	.....	1
Eau Claire.....	20,880	.....	1	.....	.....	.....	.....	.....	.....	.....
Fond du Lac.....	23,427	7	5	.....	.....	.....	2	.....	3	.....
Green Bay.....	31,017	5	5	.....	.....	.....	.....	.....	.....	1
Janesville.....	18,293	4	1	.....	.....	.....	.....	.....	1	.....
Kenosha.....	40,472	3	7	.....	.....	.....	1	.....	.....	.....
Madison.....	38,378	10	2	.....	.....	.....	2	.....	.....	2
Marinette.....	13,610	.....	.....	.....	.....	.....	3	.....	2	.....
Milwaukee.....	457,147	.....	29	.....	1	.....	18	.....	17	.....
Oshkosh.....	33,162	11	2	.....	.....	.....	.....	.....	.....	1
Racine.....	58,593	12	9	.....	.....	.....	15	.....	3	2
Sheboygan.....	30,955	.....	10	.....	.....	.....	1	.....	.....	.....
Superior.....	39,624	9	5	.....	.....	.....	2	.....	.....	.....
Wausau.....	18,661	.....	.....	.....	.....	.....	1	.....	.....	.....
Wyoming:										
Cheyenne.....	13,829	2	.....	.....	.....	.....	2	.....	.....	.....

FOREIGN AND INSULAR.

CUBA.

Communicable Diseases—Provinces.

Communicable diseases have been notified in the Provinces of Cuba during the period September 11 to 30, 1921, as follows:

Province.	New cases reported, Sept. 11-30, 1921.							
	Cerebro-spinal meningitis.	Chicken pox.	Diphtheria.	Malaria.	Measles.	Polio-myelitis (infantile paralysis).	Small-pox.	Typhoid fever.
Camaguey.....				49.			199	7
Habana.....	1	1	8	78	7	1	6	37
Matanzas.....			1	1	1			11
Oriente.....		7	4	228	7		95	51
Pinar del Rio.....				8				7
Santa Clara.....		3	1	3			14	42
Total.....	1	11	14	387	15	1	314	155

UNION OF SOUTH AFRICA.

Typhus Fever—Natal.

Under date of August 22, 1921, a fresh outbreak of typhus fever was reported in Natal, Union of South Africa. The report also stated that typhus fever had been prevalent in all the Provinces for some time, the cases being confined to the native population.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER.

Reports Received During Week Ended Oct. 28, 1921.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Amoy.....	Sept. 4-10.....		3	
Shanghai.....	Sept. 11-17.....	19	4	
India.....				July 24-30 1921: Deaths, 17,263.
Philippine Islands:				
Manila.....	Aug. 28-Sept. 3...	2		

¹ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received During Week Ended Oct. 28, 1921—Continued.

PLAGUE.

Place.	Date.	Cases.	Deaths.	Remarks.
Chile:				
Iquique.....	Sept. 17.....	1		
China:				
Amoy.....	Sept. 4-10.....		2	
Ecuador:				
Guayaquil.....	Sept. 1-15.....	1	1	
Egypt:				
Alexandria.....	Sept. 17-23.....	4	2	
Port Said.....	July 23-Aug. 5....	3	1	
Peru:				
Department—				
Callao.....	July 16-31.....		1	At Callao.
Lima.....	Sept. 1-15.....	2		
Piura.....	do.....	19	15	Deaths occurred at Sechura.
Porto Rico:				
Caguas.....				Sept. 4-24, 1921, two plague-infected rats found.
Russia:				
Siberia—				
Vladivostok.....	Apr. 1-30.....		43	First case occurred Apr. 10, 1921.
Do.....	May 1-31.....		155	
Do.....	June 1-30.....		54	
Do.....	July 1-31.....		4	
Turkey:				
Constantinople.....	Sept. 18-24.....	2		

SMALLPOX.

Canada:				
New Brunswick—				
Madawaska.....	Oct. 2-8.....	1		
Saskatchewan—				
Moose Jaw.....	Sept. 25-Oct. 1....	1		
China:				
Shanghai.....	Sept. 11-17.....	3		
Cuba:				
Antilla.....	Oct. 2-8.....	2		At Preston.
Ecuador:				
Guayaquil.....	Sept. 1-15.....	2		
Great Britain:				
Nottingham.....	Aug. 28-Sept. 24...	5		
Haiti:				
Cape Haitien.....	Sept. 18-Oct. 1....	21	3	
India:				July 21-30, 1921, 118 deaths.
Java:				
Surabaya.....	Aug. 14-20.....	1		
Mexico:				
Chihuahua.....	Oct. 3-9.....		2	
Guadalajara.....	Sept. 1-30.....	3		
Russia:				
Province—				
Esthonia.....	Aug. 1-31.....	5		At Reval.
Latvia—				
Riga.....	July 1-31.....	12		
Spain:				
Barcelona.....	Sept. 15-28.....		2	
Union of South Africa:				
Southern Rhodesia.....	Aug. 18-31.....	25	19	
Turkey:				
Constantinople.....	Sept. 18-24.....	1		

TYPHUS FEVER.

China:				
Antung.....	Sept. 5-11.....	1		
Cuba:				
Matanzas.....	Oct. 4-10.....	1		
Egypt:				
Alexandria.....	Sept. 17-23.....	4	2	
Cairo.....	July 23-Aug. 5....	14	10	
Mexico:				
Saltillo.....	Oct. 2-8.....		1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received During Week Ended Oct. 23, 1921—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Russia:				
Province—				
Esthonia—				
Reval.....	Aug. 1-31.....	6		
Latvia—				
Riga.....	July 1-31.....	52		
Turkey:				
Constantinople.....	Sept. 18-24.....	2	1	
Union of South Africa:				
Natal.....	Aug. 22.....			Fresh outbreaks.

Reports Received from July 2 to Oct. 21, 1921.

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Amoy.....	July 3-Sept. 3.....		12	
Hongkong.....	Aug. 22-28.....	37	8	Cases: Chinese, 34; foreign, 3.
Shanghai.....	Aug. 1-Sept. 10.....	35	5	Deaths, Chinese, 5; foreign, 3.
Swatow.....	Aug. 14-20.....	1	1	18 Chinese, 17 foreign.
India:				
Bombay.....	May 1-June 18.....	11	10	Mar. 6-June 25, 1921: Deaths,
Do.....	June 26-Aug. 27.....	71	43	75,281. July 3-23, 1921: Deaths
Calcutta.....	May 8-June 25.....	597	521	29,736.
Do.....	June 26-Aug. 27.....	144	124	
Karachi.....	July 10-Sept. 3.....	101	94	
Madras.....	May 15-June 25.....	3	2	
Do.....	June 26-Aug. 27.....	13	6	
Rangoon.....	Apr. 24-June 25.....	18	17	
Do.....	June 26-Aug. 27.....	18	11	
Indo-China:				
City—				
Cholon.....	June 6-12.....	5	4	Jan. 1-31, 1921: Cases, 80; deaths,
Saigon.....	May 9-June 12.....	65	44	15. May 29-June 12, 1921:
Do.....	July 4-Aug. 27.....	103	94	Cases, 251; deaths, 202.
Province—				
Anam.....	Jan. 1-31.....	42		Disseminated in neighboring
Cambodia.....	do.....	8	2	Provinces.
Cochin-China.....	do.....	18	9	In January, 1920: No cases.
Tonkin.....	do.....	12	4	January, 1920: Cases, 27; deaths,
Philippine Islands:				14.
Manila.....	May 22-June 25.....	4		January, 1920: Cases, 13; deaths,
Do.....	July 3-Aug. 27.....	29	2	10.
Province—				
Batangas.....	June 12-18.....	2	1	January, 1920: No cases.
Do.....	July 3-23.....	7	3	
Cavite.....	July 10-Aug. 6.....	2	1	
Cebu.....	June 26-July 2.....	1		
Laguna.....	June 19-25.....	1		
Do.....	July 3-6.....	1	1	
Mindoro.....	June 12-18.....	1	1	
Pampanga.....	June 5-11.....	1	1	
Tarlac.....	June 19-25.....	1	1	
Union.....	June 26-Aug. 13.....	3	1	
Poland:				
Baranowicze.....	Aug. 18.....			Present.
Bialystok.....	July 25.....			Do.
Pinsk.....	do.....			Do.
Russia:				
Districts—				
Astrakhan.....	Jan. 1-Aug. 10.....	5,132		Jan. 1 - Aug. 10, 1921: Cases,
Black Sea.....	do.....	3,152		78,011. City of Moscow, cases,
Kazan.....	Jan. 1-July 13.....	434		289.
Kharkov.....	do.....	257		From Jan. 1 to July 13, 1921,
Kursk.....	Jan. 1-Aug. 10.....	1,227		1,718 cases reported in Kuban
Moscow.....	Jan. 1-July 13.....	296		Territory.
Orel.....	Jan. 1-Aug. 10.....	1,968		City, 192 cases.
Rjasan.....	Jan. 1-July 13.....	129		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

CHOLERA—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Russia—Continued.				
Districts—Continued.				
Samara.....	Jan. 1-Aug. 10.....	5,315	.....
Saratov.....	do.....	7,201	.....
Simbirsk.....	do.....	1,160	.....
Tambov.....	do.....	2,561	.....
Tzaritzyn.....	do.....	3,028	.....
Ufa.....	do.....	5,196	.....
Voronezh.....	do.....	3,621	.....
Petrograd.....	July 6.....	6	.....
Republics—				
Bashkir.....	Jan. 1-Aug. 10.....	1,038	.....
Kirghiz.....	do.....	5,687	.....
Tartar.....	do.....	1,178	.....
Tchuvash.....	do.....	233	.....
Rostov-on-Don.....	June 1.....	747	.....
Territories—				
Azerbeidjan.....	Jan. 1-Aug. 10.....	614	.....
Don.....	do.....	2,006	.....
Turkestan.....	do.....	5,583	.....	Present on Orenburg-Tashkent line, and at Cheljabinsk, Perm, Petropavlosk, Ufa, and in Smolensk and Vitebsk districts during period under report.
Ukraine.....	do.....	.....	.....	Very prevalent; reports incomplete.
Siberia.....	do.....	1,264	.....	Far Eastern Republic.
Siam:				
Bangkok.....	Apr. 24-June 11.....	19	4	
Do.....	June 26-Aug. 6.....	4	1	
Straits Settlements:				
Singapore.....	June 12-18.....	1	1	

PLAGUE.

Algeria:				
Algiers.....	Aug. 1-31.....	1	1	
Aumale district.....	May 31-July 3.....	71	22	
Donar Megnine.....	May 31-Aug. 24.....	185	97	Native district about 140 kilometers from Algiers.
Asia Minor:				
Smyrna.....	June 19-25.....	1	.....	In suburbs.
Do.....	July 3-Sept. 3.....	4	.....
Azores:				
Horta Fayal.....	Sept. 4-10.....	1	.....
St. Michael Island—				
Capelas.....	Aug. 6-12.....	1	1	
Riberia Grande.....	Aug. 6-Sept. 24.....	33	10	10 miles from port of Ponta Delgada.
Brazil:				
Bahia.....	May 15-June 18.....	3	2	
Do.....	July 31-Aug. 27.....	2	2	
Maranhao.....	June 28.....	1	1	
Pindobassu.....	.....	.....	.....	Locality 200 miles west of Bahia; plague reported epidemic in August, 1921, with 60 deaths.
British East Africa:				
Kenya Colony—				
Kisumu.....	Apr. 24-May 21.....	.....	.....	Present.
Do.....	June 26-Aug. 6.....	.....	.....	Do.
Uganda.....	Mar. 1-June 30.....	133	101	Reports of native chiefs show 2,709 deaths during same period
Cape Verde Islands:				
St. Vincent.....	Aug. 12-18.....	6	3	
Ceylon:				
Colombo.....	May 8-June 11.....	2	2	
Do.....	June 26-Aug. 27.....	5	5	7 cases rodent plague.
China:				
Amoy.....	May 15-June 25.....	7	2	
Do.....	July 3-Sept. 3.....	.....	40	
Foochow.....	May 15-21.....	.....	.....	Present.
Hongkong.....	Apr. 24-June 25.....	81	59	
Do.....	June 26-Aug. 20.....	38	27	May 1-7, 1921: Plague rats found
Manchuria—				
Harbin.....	May 3-22.....	46	.....

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Ecuador:				
Guayaquil.....	May 1-June 15.....	10	1	
Do.....	July 16-Aug. 31.....	3	1	Plague rats found: Aug. 1-15, 1921, 18; Aug. 16-31, 1921, 36.
Egypt:				Jan. 1-Sept. 1, 1921: Cases, 266; deaths, 197.
City—				
Alexandria.....	May 21-June 24.....	10	3	
Do.....	July 1-Sept. 16.....	38	7	
Port Said.....	June 16-27.....	4	2	
Do.....	July 1-Sept. 23.....	17	7	
Suez.....	May 20-June 30.....	9	5	
Do.....	July 1-18.....	5	3	
Province—				
Assiout.....	May 24-June 16.....	9	7	
Do.....	July 30.....	1	1	
Beni-Souef.....	July 10.....	1	1	
Gharbieh.....	June 2-25.....	7	7	
Do.....	July 9-Sept. 1.....	9	9	
Girgeh.....	July 6-13.....	5	4	
Minieh.....	May 28-June 10.....	2	1	
Do.....	July 13-Aug. 18.....	7	3	
Greece:				
Piræus.....	Sept. 23.....	3		
Hawaii:				
Honokaa.....				Plague rat found, Sept. 8, 1921.
Kalapa.....	July 15-19.....	1	1	
Paauhau.....	May 21.....	1	1	
India:				
Bombay.....	May 1-June 25.....	287	204	May 1-June 25, 1921: Cases, 2,093 deaths, 1,624. June 26-Aug 27 1921: Cases, 3,016; deaths, 2,176.
Do.....	June 26-Aug. 27.....	55	39	Aug. 14-27, 1921: Surrounding territory—Cases, 161; deaths, 115.
Calcutta.....	May 8-June 18.....	11	11	
Do.....	July 24-Aug. 6.....	23	21	
Central Provinces.....	Aug. 14-20.....	27	16	
Karachi.....	May 8-June 25.....	18	14	
Do.....	June 26-Sept. 3.....	4	3	
Madras.....	Aug. 20-27.....	1	1	
Madras Presidency.....	May 22-June 25.....	112	72	
Do.....	June 26-Sept. 10.....	1,009	634	
Rangoon.....	Apr. 24-June 25.....	162	142	
Do.....	June 26-Sept. 3.....	423	364	
Indo-China:				Jan. 1-31, 1921: Cases, 57; deaths, 51.
Saigon.....	May 23-June 12.....	4	1	
Do.....	July 10-Aug. 27.....	16	11	Isolated cases in vicinity of Saigon.
Italy:				
Naples.....	Sept. 4.....	1		Worker in mill. Plague-infected rat found on premises.
Java:				
East Java—				
Surabaya.....	July 10-16.....	4	2	
Madagascar:				
Tananarive.....	June 20-July 24.....	49	46	Pneumonic.
Mauritius:				
Port Louis.....	Aug. 24.....			Present.
Mesopotamia:				
Bagdad.....	Apr. 1-May 31.....	32	35	
Do.....	July 1-31.....	1	1	
Mexico:				
Ciudad Victoria.....	June 7.....	1		In State of Tamaulipas: Case confirmed June 20, 1921.
Progreso.....				Plague rat reported found Sept. 10, 1921.
Tampico.....	June 11-30.....	36		
Do.....	July 1-Aug. 21.....	21	8	Infected rodents found July 1-Oct. 8, 1921, 154.
Morocco:				
Spanish Zone.....				Reported present in epidemic form Sept. 29, 1921.
Peru:				Mar. 1-Apr. 30, 1921: Cases, 119; deaths, 64. June 1-30, 1921: Cases, 14; deaths, 10. July 1-15, 1921: Cases, 9; deaths, 3.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Peru—Continued.				
Department—				
Ancachs.....	Apr. 1-30.....	4	1	At Huarmey.
Arequipa.....	Mar. 1-Apr. 30.....	5	3	At Mollendo.
Do.....	July 1-15.....	2	1	Do.
Callao.....	Mar. 1-June 30.....	16	1	At Callao.
Do.....	July 1-15.....	5	1	Do.
Lambayeque.....	Mar. 1-Apr. 30.....	3	2	At Chiclayo.
Libertad.....	Mar. 1-June 15.....	31	15	In 5 localities.
Lima.....	Mar. 1-June 30.....	43	23	At Lima City: Cases, 28; deaths, 18.
Do.....	July 1-15.....	2	2	At Lima City.
Piura.....	Mar. 1-June 15.....	31	29	In 4 localities.
Poland.....				In border Province, Aug. 9, 1921 Cases, 8.
Porto Rico.....				Total plague-infected rats found from beginning of outbreak to July 9, 1921: 90.
Caguas.....	Aug. 7-20.....	4	2	Aug. 28-Sept. 3, 1921: One plague rat found.
Fajardo.....				
Manati.....	July 17-23.....	1	1	Suburb coextensive with San-turce.
Martin Pena.....	July 3-9.....	1		
San Juan.....				Plague rat on steamship San Luis, in San Juan harbor. Sept. 9, 1921.
Portugal:				
Lisbon.....	July 29-Sept. 3.....	7		
Portuguese West Africa:				
Angola—				
Loanda.....	Apr. 24-June 18.....	16		
Do.....	July 17-23.....		1	
Russia:				
Siberia—				
Vladivostok.....	May 1-31.....	141	155	
Senegal:				
Dakar.....	May 1-June 30.....	54	47	
Do.....	July 1-Aug. 31.....	117	93	
Siam:				
Bangkok.....	Apr. 24-June 18.....	7	6	
Do.....	July 24-Aug. 13.....	7	7	
Straits Settlements:				
Singapore.....	May 8-June 18.....	5	5	
Do.....	June 26-Aug. 20.....	4	4	
Syria:				
Alexandretta.....	July 10-Aug. 6.....	18	4	
Beirut.....	May 31-June 30.....	2		
Do.....	July 1-Sept. 4.....	17		
Turkey:				
Constantinople.....	July 10-Sept. 10.....	4	2	
Union of South Africa.				
On vessels:				
Steamship Kishenev.....	May 2.....	1		At Chefoo, China. Plague death en route. Vessel sent to quarantine, Kentucky Island, where to May 6 a total of 16 deaths was reported. (Public Health Reports, July 1, 1921, p. 1531.)
Steamship Oreland.....				At Genoa, Italy, June 12, 1921; from La Plata, Argentina. Two fatal cases plague in crew en route.
Steamship Ralph Moller.....	June 8.....	4	1	At Chefoo, China, from Vladivostok, Siberia. Three fatal cases en route. One case with fatal termination removed at Vladivostok.
Steamship San Luis.....	Sept. 9.....			In harbor, San Juan, Porto Rico, Sept. 9, 1921: 1 plague rat.
Steamship Tenyo Maru.....				En route between Nagasaki and Kobe, Japan, June 28, 1921, 1 fatal case.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

SMALLPOX.

Place.	Date.	Cases.	Deaths.	Remarks.
Algeria:				
Algiers.....	May 1-June 30.....	3		
Oran.....	Sept. 1-10.....	1		
Asia Minor:				
Smyrna.....	May 22-28.....	1		On the steamship Nicholas.
Do.....	July 24-30.....	2		
Australia:				
Victoria—				
Geelong.....	May 5-16.....	2		Mild.
Do.....	July 12-29.....	2		
Melbourne.....	Apr. 9-23.....	4	1	Mild epidemic. Slight epidemic reported.
Do.....	July 17-23.....	1	1	
Bolivia:				
La Paz.....	Apr. 1-30.....	5	4	
Brazil:				
Pernambuco.....	Mar. 28-May 22.....	28	4	
Rio de Janeiro.....	May 8-June 18.....	11	2	
Do.....	June 26-Sept. 10.....	92	18	
Sao Paulo.....	May 23-June 26.....	7	2	
Do.....	June 27-Aug. 7.....	12	2	
British East Africa:				
Kenya Colony—				
Zanzibar.....	May 8-14.....	12	4	Origin, India.
Bulgaria:				
Sofia.....	May 15-31.....	6		
Canada:				
Alberta—				
Calgary.....	May 26-June 18.....	3		
British Columbia—				
Vancouver.....	May 28-June 25.....	8		
Manitoba—				
Winnipeg.....	do.....	6		
Do.....	June 26-Sept. 17.....	13		
New Brunswick—				
Charlotte County.....	July 10-Sept. 10.....	9		
Madawaska County.....	Aug. 7-13.....	1		
Restigouche County.....	June 19-25.....	1		
Westmoreland County.....	June 26-July 2.....	2		
Nova Scotia—				
Sydney.....	June 5-18.....	2		
Do.....	June 26-July 2.....	4		
Ontario—				
Fort William and Port Arthur.....	Aug. 7-27.....	2		
Hamilton.....	June 12-18.....	3		
Do.....	July 3-9.....	1		
Kingston.....	June 5-11.....	1		At 2 localities in vicinity, 2 cases.
London.....	June 5-25.....	2		
Montreal.....	June 12-18.....	1		
Do.....	July 17-23.....	1		
North Bay.....	June 11-25.....	3		
Do.....	June 26-July 9.....	2		
Ottawa.....	June 12-25.....	21		
Do.....	June 26-Aug. 13.....	35		
Toronto.....	Aug. 28-Sept. 24.....	3		
Saskatchewan—				
Moose Jaw.....	Sept. 4-10.....	1		
Chile:				
Antofagasta.....	May 16-June 19.....	228	106	
Arica.....	May 31.....	2		
Mojillones.....	May 30-June 5.....			Present Also at interior nitrate plants.
Valparaiso.....	June 26-Sept. 10.....		25	
China:				
Amoy.....	May 8-June 4.....		4	June 5-25: Present.
Do.....	June 26-Sept. 3.....		2	
Antung.....	May 16-June 26.....	12	2	
Canton.....	Apr. 1-30.....			Present.
Chungking.....	May 1-June 25.....			
Do.....	June 26-Aug. 20.....			Do.
Foochow.....	May 8-June 25.....			Do.
Do.....	June 26-Aug. 27.....			Do.
Hankow.....	May 15-21.....	4	1	
Do.....	July 16-18.....	1		
Hongkong.....	Apr. 24-June 25.....	99	84	
Do.....	July 24-Aug. 20.....	3	1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
China—Continued.				
Manchuria—				
Dairen.....	May 9-June 26.....	44	5	
Do.....	June 27-Aug. 14.....	8	3	
Harbin.....	May 16-June 13.....	5		
Do.....	June 27-July 10.....	2		
Mukden.....	May 22-June 11.....			Present.
Do.....	July 2-Aug. 20.....			Do.
Nanking.....	May 8-June 25.....			Do.
Do.....	June 26-Aug. 27.....			Do.
Shanghai.....	June 20-23.....	1		
Do.....	July 3-Aug. 6.....	2	1	
Tientsin.....	May 8-June 25.....	31		Mission hospital.
Do.....	June 26-Aug. 20.....	9	1	
Tsingtau.....	May 9-June 12.....	4	1	
Do.....	July 25-31.....	1		
Chosen (Korea):				
Chemulpo.....	May 1-June 30.....	11	3	
Fusan.....	.....do.....	12	3	
Gensan.....	.....do.....	5	2	
Seoul.....	.....do.....	3		
Colombia:				
Santa Marta.....	June 5-25.....			Present.
Do.....	June 26-Aug. 27.....			Do.
Cuba:				
Antilla.....	June 5-25.....	7		
Do.....	June 26-Oct. 1.....	71		
Cienfuegos.....	June 26-Sept. 3.....	3		
Matanzas.....	June 12-18.....	1	1	
Do.....	July 3-31.....	4	2	
Nuevitas.....	July 4-Sept. 25.....	15		6 of these reported found in vicinity.
Santiago.....	June 1-50.....	28	2	
Do.....	July 1-Sept. 30.....	47	1	
Dominican Republic:				
La Ramona.....	Aug. 25.....			In eastern Provinces, Aug. 25, 1921, 2,000 cases, estimated.
San Pedro de Macoris.....	Aug. 19-25.....	40	2	Cases numerous.
Santo Domingo.....	Sept. 1-18.....	10		On sugar estates in same Province, about 400 cases.
Ecuador:				
Eloy Alfaro.....	Aug. 1-15.....	1		In surrounding country.
Guayaquil.....	May 1-June 30.....	31		
Do.....	July 1-Aug. 15.....	22	1	
Egypt:				
Cairo.....	Mar. 19-Apr. 29.....	2	1	
Port Said.....	Apr. 2-May 20.....	10		
Finland:				
.....	May 1-15.....	1		
France:				
Brest.....	May 22-June 4.....	18		
Cherbourg.....	Aug. 1-31.....	1		Varioloid.
Paris.....	July 22-31.....	2	1	
Rouen.....	May 1-20.....	2		
Germany:				
.....	.....	.....	.....	Apr. 2'-May 28, 1921: Cases, 12. Additional, Apr. 17-May 7, 1921: Cases, 57; deaths, 7.
Great Britain:				
Nottingham.....	May 29-June 4.....	1		
Do.....	July 3-Aug. 27.....	51		Stated Aug. 17 to be epidemic and to have begun about two months previous to date; 57 cases reported.
Queentown.....	July 3-9.....	1		
Southampton.....	June 26-July 2.....	1		
Greece:				
Saloniki.....	June 6-12.....		1	
Haiti:				
Cape Haitien.....	June 19-25.....	24	2	
Do.....	June 26-Sept. 17.....	177	15	
Port au Prince.....	Sept. 11-17.....			Present.
India:				
Bombay.....	May 1-June 25.....	84	50	Mar. 20-May 21, 1921: Deaths, 3,232. June 5-25, 1921: Deaths, 658. July 3-9, 1921: Deaths, 393.
Do.....	June 26-Aug. 27.....	60	41	
Calcutta.....	May 8-June 25.....	8	8	
Do.....	June 26-Aug. 29.....	5	6	
Karachi.....	May 29-June 25.....	25	17	
Do.....	June 26-July 30.....	8	2	
Madras.....	May 8-June 25.....	33	11	
Do.....	June 26-Sept. 10.....	49	23	
Rangoon.....	Apr. 24-June 4.....	20	3	
Do.....	July 10-Aug. 13.....	4	1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Indo-China.....				Jan. 1-31, 1921: Cases, 102, deaths, 15.
City—				
Saigon.....	May 9-15.....	2	1	
Do.....	Aug. 21-27.....	1	1	
Province—				
Anam.....	Jan. 1-31.....	35		January, 1920: Cases, 16; deaths, 3.
Cambodia.....	do.....	21	3	January, 1920: Cases, 139; deaths, 51.
Cochin China.....	do.....	19	12	January, 1920: Cases, 8; deaths, 1.
Tonkin.....	do.....	27		January, 1920: Cases, 224; deaths, 43.
Italy:				
Catania.....				Province: June 6-20, 1921: Cases, 5.
Do.....	July 18-Aug. 14.....			In Province: Cases, 7.
Genoa.....	Apr. 1-May 31.....	11		
Do.....	July 4-10.....	2		
Messina.....	May 23-June 26.....	2	1	
Do.....	July 11-17.....	1		In Province, July 4-17, 1921: Cases, 9.
Palermo.....	May 18-June 21.....	7	1	
Milan.....	Apr. 1-30.....	2		
Do.....	June 29-July 19.....	3		
Japan:				
Kobe.....	May 24-June 26.....	3		
Nagasaki.....	May 23-June 26.....	6	1	
Taiwan Island.....	July 1-10.....	1		
Java:				
East Java—				
Soerabaya.....	June 19-25.....	2		
Do.....	July 10-Aug. 7.....	9	1	
West Java—				
Bandoeng.....	May 27-June 3.....	1		
Do.....	July 8-21.....	1		
Batavia.....	May 6-June 23.....	17	15	
Do.....	July 1-Sept. 1.....	106	40	
Buitenzorg.....	Apr. 20-June 23.....	16		
Do.....	July 22-Aug. 4.....	2	1	
Garret.....	May 6-12.....	1		
Do.....	July 8-Aug. 4.....	4		
Krawang.....	Apr. 29-June 30.....	33	3	
Do.....	July 22-Aug. 4.....	14	1	
Lebak.....	Apr. 29-May 26.....	12	2	
Pandeglang.....	June 3-30.....	2	1	
Do.....	July 8-14.....	1		
Jugoslavia.....				Mar. 14-May 13, 1921: Cases, 334; deaths, 83. June 27-July 10, 1921: Cases, 111; deaths, 27.
Mesopotamia:				
Bagdad.....	Apr. 1-May 31.....	3	1	
Mexico:				
Guadalajara.....	June 1-30.....	3		
Do.....	July 1-Aug. 31.....	10	3	
Tampico.....	July 11-20.....	1		
Chihuahua.....	May 23-June 27.....		3	
Mexico City.....	May 15-June 25.....	246		Including municipalities in Federal District.
Do.....	June 26-Sept. 3.....	204		Do.
San Luis Potosi.....	July 17-Aug. 6.....		2	
Torreon.....	Sept. 1-30.....	2		
Vera Cruz.....	June 13-19.....		1	
Do.....	July 11-Sept. 11.....		3	
Newfoundland:				
Tilton.....	Aug. 20-26.....	3		
Panama.....				Jan. 1-Sept. 19, 1921: Cases, 205, of which 33 were nonresidents.
Canal Zone.....	Apr. 1-May 31.....	2		
Colon.....	Jan. 1-May 31.....	111		From the interior.
Do.....	Aug. 30.....	1		Sept. 4-19; 1 from interior.
Panama.....	Feb. 1-June 30.....	54		
Do.....	July 1-Sept. 19.....	4		
Poland:				Mar. 1-Apr. 30, 1921: Cases, 1,117; deaths, 142.
District—				
Bialystok.....	Mar. 1-Apr. 30.....	3		
Cracovia.....	do.....	56	6	
Kielce.....	do.....	180	26	
Leopol.....	do.....	52	16	
Lodz.....	do.....	72	9	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Poland—Continued.				
District—Continued.				
Lublin.....	Mar. 1-Apr. 30....	397	30	In Teschen.
Posen.....	do.....	26	2	
Silesia.....	do.....	10	—	
Stanislawow.....	do.....	30	5	
Tarnopol.....	do.....	156	31	
Warsaw.....	do.....	36	4	
Warsaw City.....	do.....	90	13	
Portugal:				
Lisbon.....	May 15-June 25....	—	34	
Do.....	June 26-Sept. 17...	33	3	
Oporto.....	June 19-25.....	1	—	
Do.....	Sept. 11-17.....	1	—	
Portuguese East Africa:				
Lourenco Marques.....	May 8-28.....	8	—	
Do.....	July 10-Aug. 13....	7	4	
Rumania:				
District—				
Hotin.....	Apr. 1-30.....	40	9	
Orthel.....	Mar. 1-31.....	2	—	
Russia:				
Province—				
Esthonia.....	Apr. 1-June 30....	9	—	
Do.....	July 1-31.....	50	—	
Latvia.....	Apr. 1-May 31....	41	—	
Riga.....	June 1-30.....	1	—	
Siberia.....	June 1-30.....	1	—	
Vladivostok.....	June 1-30.....	1	—	
Serbia.....	Aug. 7-20.....	2	1	Mar. 24-May 21: Cases, 205; deaths, 41.
Belgrade.....	May 1-31.....	1	1	
Senegal:				
Dakar.....	May 1-31.....	1	1	
Spain:				
Barcelona.....				
Do.....	May 12-June 22....	—	13	
Do.....	July 7-Aug. 24....	—	8	
Huelva.....	July 1-31.....	—	2	
Madrid.....	June 1-30.....	2	—	
Do.....	Aug. 1-31.....	—	1	
Malaga.....	May 1-June 30....	—	57	
Do.....	July 1-Aug. 31....	—	57	
Tarragona.....	May 9-15.....	—	1	
Valencia.....	May 22-28.....	1	—	
Do.....	July 2-Aug. 20....	9	2	
Straits Settlements:				
Singapore.....	June 12-18.....	1	—	
Do.....	July 10-Aug. 27....	7	3	
Switzerland:				
Basel.....	Sept. 11-17.....	3	—	
Zurich.....	May 28-June 11....	10	—	
Do.....	July 3-Sept. 2....	4	—	
Syria:				
Aleppo.....	Apr. 9-16.....	—	—	Present.
Beirut.....	May 10-30.....	1	1	
Do.....	Aug. 8-14.....	1	1	
Tunis:				
Tunis.....	May 30-June 17....	2	3	
Do.....	July 2-Sept. 23....	14	10	
Turkey:				
Constantinople.....	June 12-25.....	5	—	
Do.....	June 26-Aug. 13....	8	—	
Union of South Africa.....				
				January - April, 1921: Cases (white), 18; deaths, 1. Cases (native), 192; deaths, 5. May 1-31, 1921: Cases, 65; deaths, 3, all natives. June 1-30, 1921: Cases, 64, of which 1 white. July 1-31, 1921: Natives—Cases, 129; deaths, 2. White—1 case. Aug. 28-Sept. 3, outbreaks in Cape Province, Orange Free State, and Transvaal.
				Outbreaks.
Cape Province.....	Apr. 24-June 25....	—	—	
Do.....	July 1-31.....	118	—	Do.
Natal.....	Apr. 24-June 25....	—	—	Do.
Do.....	July 1-31.....	1	—	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.**Reports Received from July 2 to Oct. 21, 1921—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Union of South Africa—Contd.				
Durban.....	Aug. 7-27.....	3	.....	Stated to have been imported. Outbreaks.
Orange Free State.....	May 29-June 25.....	.....	.....
Southern Rhodesia.....	July 14-20.....	27	.....
Transvaal.....	May 22-June 18.....	.....	.....
Do.....	July 1-31.....	11	.....	Do.
Johannesburg.....	do.....	2	.....	District.
Do.....	Sept. 1-7.....	31	11	
On vessel:				
Steamship Niagara.....	June 1.....	1	.....	At Sydney, Australia, from Vancouver via Fiji and New Zealand.

TYPHUS FEVER.

Algeria:				
Algiers.....	May 1-June 30.....	109	25	
Do.....	July 1-Aug. 31.....	22	7	
Oran.....	May 22-June 30.....	35	28	
Do.....	July 1-Sept. 10.....	15	13	
Asia Minor:				
Smyrna.....	June 12-18.....	1	.....	In districts.
Do.....	Aug. 28-Sept. 3.....	1	.....
Bolivia:				
La Paz.....	Apr. 1-June 30.....	50	51	
Do.....	July 1-31.....	19	3	
Brazil:				
Bahia.....	June 19-25.....	1	1	
Do.....	Aug. 7-13.....	1	1	
Porto Alegre.....	June 19-25.....	.....	3	
Do.....	Aug. 7-13.....	.....	1	
Canary Islands:				
Teneriffe.....	Aug. 14-Sept. 10.....	.....	2	
Chile:				
Concepcion.....	Apr. 12-June 20.....	.....	8	July 25-Aug. 29, 1921: In hospital, 30 cases; in city, estimated, 103 cases. Prevalent.
Do.....	July 12-Sept. 5.....	.....	14	
Los Angeles.....	July 26-Aug. 8.....	.....	.....
Valparaiso.....	Mar. 27-May 28.....	.....	4	
Do.....	June 26-Sept. 10.....	.....	3	
China:				
Antung.....	May 30-June 5.....	1	.....
Do.....	June 27-Sept. 4.....	9	.....
Hankow.....	May 22-June 11.....	3	.....
Manchuria—				
Harbin.....	May 23-29.....	1	.....
Do.....	July 4-10.....	1	.....
Chosen (Korea):				
Chemulpo.....	June 1-30.....	2	.....
Fusan.....	May 1-31.....	1	.....
Gensan.....	May 1-June 30.....	4	.....
Seoul.....	May 1-31.....	1	.....
Czechoslovakia:				
Prague.....	June 5-26.....	5	2	
Egypt:				
Alexandria.....	May 21-June 23.....	21	8	
Do.....	June 24-Sept. 16.....	38	15	
Cairo.....	Mar. 19-June 24.....	235	102	
Do.....	June 24-July 22.....	44	22	
Port Said.....	Apr. 2-May 13.....	8	2	
Finland.....	May 1-15.....	5	.....
Germany:				
Hamburg.....	May 27-June 4.....	1	.....	Apr. 24-June 4, 1921: Cases, 7.
Great Britain:				
Dublin.....	May 29-June 4.....	1	.....
Greece:				
Saloniki.....	May 23-June 26.....	21	6	
Do.....	June 27-Aug. 14.....	1	2	
Guatemala:				
Guatemala City.....	July 1-31.....	.....	1	Jan. 1-July 13, 1921: Cases, 71; occurring in 4 counties.
Hungary.....				
Italy:				
Messina (Province).....	Aug. 29-Sept. 4.....	2	.....	In 2 localities.
Japan:				
Nagasaki.....	May 23-June 5.....	7	2	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from July 2 to Oct. 21, 1921—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Java:				
West Java—				
Batavia.....	Aug. 4-25.....	29	3	
Jugoslavia.....	May 1-14.....	6		Jan. 30-May 14, 1921: Cases, 286; deaths, 40; June 27-July 10, 1921: Cases, 23; deaths, 7.
Belgrade.....	June 19-25.....	3		
Zagreb.....	July 10-Sept. 3.....	37	4	
Do.....				
Mesopotamia:				
Bagdad.....	May 1-31.....	1	3	
Mexico:				
Mexico City.....	May 15-June 25.....	102		Including municipalities in Federal District.
Do.....	June 26-Sept. 3.....	148		Present.
San Luis Potosi.....	July 31-Aug. 6.....			
Morocco:				
Spanish Zone.....				Reported present in epidemic form Sept. 29, 1921.
Poland.....				Mar. 1-Apr. 30, 1921: Cases, 11,489; deaths, 1,131.
District—				
Bialystok.....	Mar. 1-Apr. 30.....	853	45	
Cracovia.....	do.....	603	90	
Kielce.....	do.....	848	62	
Leopol.....	do.....	2,508	277	
Lodz.....	do.....	521	53	
Lublin.....	do.....	1,446	83	
Posen.....	do.....	77	5	
Silesia.....	do.....	26		In Teschen.
Stanislawow.....	do.....	1,557	232	
Tarnopol.....	do.....	1,855	194	
Warsaw.....	do.....	972	61	
Warsaw city.....	do.....	223	29	
Portugal:				
Oporto.....	July 12-Aug. 20.....	2		
Rumania:				
District—				
Hotin.....	Apr. 1-30.....	107	10	
Kishinev.....	Apr. 1-June 30.....	89		District.
Do.....	July 1-31.....	11		
Orhei.....	Mar. 1-May 30.....	146		
Russia:				
Province—				
Esthonia.....	Apr. 1-June 30.....	113		
Do.....	July 1-31.....	50		
Latvia.....	Apr. 1-June 30.....	599		
Siberia—				
Vladivostok.....	Mar. 1-June 30.....	5	3	
Do.....	July 1-31.....	4	3	
Serbia.....				Mar. 24-May 21, 1921: Cases, 70; deaths, 7.
Spain:				
Madrid.....	May 1-June 30.....		3	
Do.....	July 1-31.....		2	
Syria:				
Beirut.....	May 20-June 10.....	1	1	
Tunis:				
Tunis.....	June 11-17.....		3	
Do.....	July 30-Sept. 9.....		2	
Turkey:				
Constantinople.....	May 22-June 18.....	11		
Do.....	June 26-Sept. 17.....	41	1	
Union of South Africa.....				January-April, 1921: Cases (white), 34; deaths, 2. Cases (native), 3,376; deaths, 437. June 1-30, 1921: Cases, 738; deaths, 66. July 1-31, 1921: Natives—Cases, 868; deaths, 121. Whites—Cases, 15; deaths, 2. Orange Free State and Natal: Cases, 25; deaths, 10.
Cape Province.....				Apr. 24-June 25, 1921: Outbreaks. May 1-31, 1921: Cases, 542; deaths, 51. July 1-31, 1921: Cases, 858; deaths, 113.
Capetown.....	May 13-19.....	10	3	At native cantonment in vicinity.
East London.....	May 22-June 18.....	1	1	
Do.....	Aug. 21-27.....	1		
Port Elizabeth.....	Aug. 7-20.....	7		
Natal.....	July 10-23.....			Outbreaks.
Orange Free State.....	Apr. 21-May 28.....			Do.
Do.....	July 10-Sept. 3.....			Do.